

Medical Times

THE JOURNAL OF THE AMERICAN MEDICAL PROFESSION

A Monthly Record of Medicine, Surgery and the Collateral Sciences

Published by THE MEDICAL TIMES COMPANY at 95 Nassau Street

57 Years of Faithful Service

Established 1872

Entered as second class matter Nov. 9, 1901, at the post office of New York, New York, under the Act of March 3, 1879.

Vol. LVI, No. 6

New York

Twenty-Five Cents a Copy
Two Dollars a Year

MEDICAL JURISPRUDENCE NUMBER

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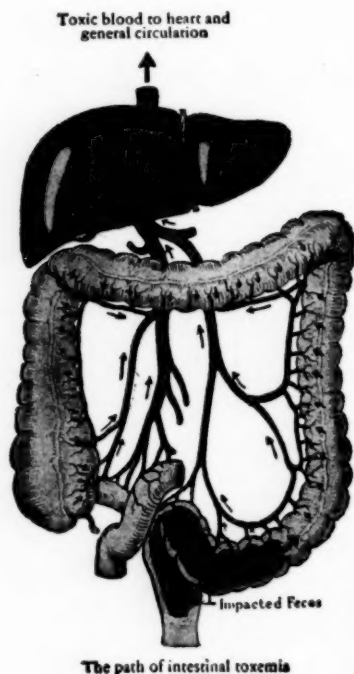
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Criminal Psychology*

BY HERMAN J. WITTE, ESQ.,

OF THE NEW YORK BAR.

New York

Webster's latest dictionary refers to psychology as a subject divided into three sub-sciences:

- (1) Individual psychology which treats of the developed mind of the individual.
- (2) Comparative psychology which treats of the comparative study of different classes of minds.
- (3) Genetic or evolutionary psychology which is a study of the mind's development.

Webster places the subject of criminal psychology in the second division, namely: The comparative study of the minds of different classes.

Some years ago, prior to my confining myself to the general practice of law, I had much to do with the apprehension and prosecution of every class of the professional criminal. Perhaps I had better explain the use of the words "Every class of professional criminal."

Criminals, like those engaged in legitimate commercial industries, specialize in a particular branch of criminal industry, such as burglary, picking of pockets, forgery, shoplifting, penny-weighting, confidence men and so on down the line. Each follows his own line of criminal vocation and as a rule the professional criminal will not attempt to turn a trick outside of the particular line of work in which he specializes, that is a fellow who is a burglar will not undertake to pick pockets, nor a pick-pocket will not engage as a professional forger or a shop-lifter engage as a penny-weighter or confidence man—they confine themselves to their own specialty.

When you take the criminal as a subject of psychological comparison, that is as a study of different classes of minds, you will find yourself practically in a field without limitation.

Let us, for instance, draw a line of distinction between the criminal of today and the professional criminal or crook of thirty years ago—you still have the pick-pocket, the burglar, the forger and the penny-weighter, etc., today as you had thirty years ago, but the criminal today is of a more desperate type than was known in years gone by. Today practically every criminal picked up by the police carries a gun, not solely for the purpose of using it to effect an escape if cornered, but is of such a desperate character that he will use it and wantonly kill if in any wise crossed in his criminal act. Thirty years ago—as a rule you would not find among all the criminal element more than ten per cent that would carry a gun and such of them who did carry a gun would never think of using it except when cornered, to make their escape, and then use it with the idea to disable, rather than to kill. When I make this statement I might qualify it by saying, there were of course exceptions to that rule. There were then, as now, criminals who would not hesitate to kill to avoid capture, but the percentage of the class were few in comparison with what the police have to contend with today.

Let me illustrate a psychological point of view of a criminal mind in the matter of the use of a gun, of thirty years ago. I happened to know, among a great number of criminals, one named George Duncan. Duncan was a safe-blower and would invariably pull a gun and shoot to avoid capture by the police. One day while walking along the street I saw this Duncan come from around a corner within ten feet of me. In a moment we were within four or five feet of each other. I knew Duncan and he knew me. At the time he was wanted for having blown a safe. I looked at him and said "Well, George, what are you thinking about doing,

* Read before the Society of Medical Jurisprudence, October 11.

some shooting?" He shook his head and answered "No, I am not going to try any shooting." I continued towards him and said, "You know they want to see you at headquarters, I'll take your gun if you have any." I felt of him and found he had none. As I felt of him he said, "I'll go with you," and as we walked along, Duncan addressed me—saying "Listen, Mr. Witte, this talk of me shooting at police officers is all very true in a way with the exception that I never in my life shoot at a police officer or anybody else. While I did lots of shooting at times when it looked like they would get me, I always figured this way—turning and firing a gun apparently at the fellow that is after you makes him stop and your chance of getting away is all the better, and while I have blown a safe or two and taken the chances of being caught and sent to the pen I have never been darn fool enough to take a shot at a man and maybe go to the end of the rope. That is where I draw the line."

Now as a contrast to Duncan's idea, let me, as an illustration, cite the case of a burglar whom I knew by the name of George Wilson. Wilson was brought before me one morning and upon his arrest they found a gun on him—they had him cornered where he could not get away. As I looked at him and looked at the gun, I said, "What's the idea, Wilson, are you a killer?" In answer he said, "You know the first thing that I have always done when I broke into anybody's house was to fix a getaway, both out through the front and the back of the house, either by raising a window and letting it up wide open or propping a door open. I am not looking to kill people," but when his bertillion measurement was taken he was identified under another name as being wanted in Pittsburgh, Pennsylvania, for the killing of a police officer who had him cornered and was about to arrest him. Wilson was sent to Pittsburgh where he was tried and I understand afterwards executed.

The idea of self-protection runs through the mind of every criminal, whether it is by the use of a gun or through some other act. To make myself clear in that respect, I might better illustrate the idea by referring to a young man I once defended here in New York by the name of George Donnelly. Donnelly was a pick-pocket and had been arrested in connection with another professional criminal who was a safe-blower and on whom was found at the time of the arrest a full kit of safe burglary tools. It was claimed Donnelly had acted as lookout man in the robbery of a bank in Gilbertsville, New York. He and the other were taken to Coopers-town, New York, the County Seat for trial. I was retained as attorney to represent them. Upon the preliminary hearing before the Mayor the one who had the kit of burglars' tools was dismissed for insufficient evidence. Donnelly was held to await the action of the Grand Jury. Later on he was indicted and tried and convicted. The Judge had the reputation of being very severe, and that criminals who came before him generally received the limit. Donnelly begged of me not to abandon him, and asked that I do my utmost to get him a new trial, to do something that would help him. While he had no money he promised if he became free he would work his hands and flesh to the bone to repay me. After the verdict of guilty had been returned I made the motion upon the usual grounds that the verdict be set aside and the defendant granted a new trial and also moved for an arrest of judgment in order to give me an opportunity to prepare and submit a memorandum of law in support of my argument upon the motion for a new trial. After the hearing of that motion upon my memorandum of law, Donnelly was given a new trial and upon the second trial he was acquitted. I gave Donnelly his railroad fare and pullman ticket together

with a \$10.00 bill and said "Go out now and try to do what's right. Some day if you ever can pay me, all right." About four weeks after this, one day Donnelly and a friend of his walked into my office and Donnelly said, "Mr. Witte, you know I did not want you to think I had forgotten you, because you did not hear from me, and my obligation to you and I simply came down here to let you know I have not forgotten; when I started down I had nothing but on my way down I managed to get a little money that I can give you." He had got that far when a gentleman rushed into my office, a client of mine who had been with me a few moments before Donnelly and his friend came in. He was very excited and looked around towards the floor of my office—I said, "What's the matter?" He answered "Lost \$2,000—" I said "What's that?" He repeated "I lost \$2,000—I must have dropped it on the floor here." Finally Donnelly said "Maybe you didn't lose it—maybe it is in your pocket, let me help you," and with that stepped forward, brushed the gentleman's coat open and put in his hands, as if apparently in the pockets of the coat, and in a moment brought his hands from, apparently, one of the pockets, and in it was a large roll of bills and said "Is this what you lost, Mister?" He said "My Lord, yes." Donnelly said "See you were so excited you did not know where you had put it." All confused he repeatedly thanked Donnelly and in a few moments went out. After he had gone Donnelly addressed me and said—"When I came into this building I bumped into that gentleman as he came out of the elevator and when I saw him come back into your office and heard him say he had lost his money and I found that he was a client of yours, why I could not keep it, so I handed it back as you saw." Now you may think that that was a magnanimous act on the part of Donnelly but Donnelly did not figure that way. Donnelly figured immediately that this man, who had just said he lost his money within a few moments of Donnelly coming into my office that I would soon connect the two and knowing Donnelly as a skilled pickpocket I must conclude he got the money, that is why he gave it back. Three weeks later while walking along 47th Street I felt someone brush against my side and turned and saw it was Donnelly, and said "What are you trying to do—are you trying to pick my pocket?" He backed away saying "Oh, excuse me, Mr. Witte, I did not know it was you—no, no, that's all right," and turning went the other way.

Take another case of self-preservation as an illustration. Some years ago I happened to bring back from England a celebrated forger named Charlie Fischer. Fischer's wife was known in the criminal world as "Sheeny Rachel" a very clever crook. In returning from England to this country we came on the ship named *Tutonic*. Fischer was broke and I let him have the money to pay his wife's fare back in the second cabin. Practically every day on the way over Fischer would spend most of his time over in the second cabin talking to his wife. One day Fischer said to me, "Mr. Witte, there is a pretty clever English crook over there in the second cabin." I said, "Yes—what else?" He answered, "Well, you know, one of the lady passengers had about seven hundred pounds in her trunk and he got it." I said, "Yes, well you go over there and your wife is over there—you better go over and tell that English crook he has just about half an hour to get that seven hundred pounds back into that lady's trunk or something is going to happen to somebody and you know where it is going to hit, if it becomes known that a passenger had been robbed over there." He started off and was back in about an hour and said "That money has been put back." I said "All right, we will verify that." I went

to the Captain and told him I understood there was quite a well-known English crook in the second cabin and people who had valuables ought to turn them over to the purser for safe-keeping and do it before they find somebody has taken them. The Captain answered by saying he would see that they did so. Afterwards the captain informed me one lady had turned in seven hundred pounds and felt sure from the way she found it in her luggage somebody must have disturbed it, because it was not as she left it the last time she saw it. Fischer's action in this matter was solely to protect himself and wife and for no other reason.

When you speak of that class of criminals that operate as pickpockets, burglars and forgers, you speak of a class who operate solely through the dictation of their own mind taking the risk of being caught.

When you take the class of criminal known as a confidence man, to be successful he must instill a confidence in the mind of the person whom he intends to make his victim. He must stage the scene and arrange the colors true to the picture. Take for instance, the old confidence man that used to sell gold bricks—the selling of a gold brick called for a great deal of detail work. Probably I can explain it better by illustrating—(confidence men, generally, of course, work in couples). Among the most clever of these confidence men were two, one named George Hennessey and the other Jim or "Red" Austins. Ordinarily if you met either one of them on the street or elsewhere he would impress you as being a prosperous professional man of some kind, but when it came to getting easy money by selling a gold brick that was another proposition. One day down in Nashville, George Hennessey made up as an old prospector called upon Mr. Noll of that city, a gentleman who was identified with several banks, was a director of the City Railway Company and had other large interests, and introduced himself by crying and talking, saying "No it isn't he—it isn't he," and appeared greatly distressed. Mr. Noll said, "My good man what is the matter?" "Well," he said, "you know it is this way, I heard of you—that your name was Noll. Years ago I had an old side-partner, George Noll, out in California; we used to mine together and we made a lot of money, I used to blow mine and George used to keep his and finally he went back to his home down here in Tennessee—I want to find him but you are not he." Mr. Noll said, "What is your trouble?" The old prospector answered, "Not so long ago an Indian and I were hunting and shot a deer and where it fell we discovered an outcropping or ledge that turned out to be rich in gold and we staked some claims and we rounded out a lot of the ore and ran it into a brick and I want to see my old partner, George, and have him turn it into money for us so that we can get machinery to work this mine—I do not know anybody I can trust but he, I guess it is another Noll I heard about living down here about sixty miles and I am going down to see him." Mr. Noll became very much interested and said, "Well my good man if you do not find your friend come back and see me," and in about a week he did come back and said, "Well I found out where he had lived with his sister but my old partner is dead, I talked to his sister and she showed me the old buckskin vest he used to wear and the big old silver watch he used to carry but he is dead." "Well," said Mr. Noll, "I am sorry to hear that but I will be glad to help you." The apparent old prospector (Hennessey) said, "I do not know, you look like a man one could trust. So it was arranged that Noll and the old prospector were to go out and see the gold brick. On the way out the old prospector told Noll about the Indian, how he hated the Paleface but said "Do not

mind him, he will not hurt you." So when they drew near the cabin a fellow was seen to run from it into the woods, draped in an Indian blanket and who looked like an Indian. The old prospector said, "do not pay any attention to him at all." After getting out of the conveyance the prospector dug down outside of the cabin and brought out a box in which appeared a big brick, which looked like a gold brick and having a file the prospector began filing here and there on the brick and saved the filings. Every once in a while the Indian would come to the edge of the wood and give a war-hoop and yell "Paleface," and every time the Indian would so yell Mr. Noll would look up with a frightened stare and as he did so the old man would throw away the filings and substitute it with pure gold from a bottle he carried concealed in his hand. Of course, when these alleged filings were analyzed they were found to be pure gold and if the brick had been solid gold it would have been worth about \$7,000. As it was, after having these alleged filings tested and found to be pure gold Mr. Noll offered the old prospector \$5,000 for the brick and the old prospector took it. That night when Mr. Noll returned home they told him a gentleman had been there and left a package for him. They brought it in to him and upon its being opened it was found to be a Navajo blanket. There was a little note in the package, which read as follows: "My dear Mr. Noll: You are such a nice fellow the most valuable thing we could give you for your \$5,000 is this blanket—take it and keep it, it is a genuine Navajo blanket—the brick, you will find is brass. Good luck." The next day Noll met Hennessey on the street. As he came up to Noll, Hennessey looked at him and began to cry and say, "It isn't he, it isn't he, my old side-partner," Noll took hold of Hennessey and had him arrested. I said to Hennessey, when he told me about it, "What was your idea in sending him the blanket and then the next day walking up and looking at him and pulling that stunt on him again saying, 'It isn't he,' and crying?" He answered, "I'll tell you, Mr. Witte, this Mr. Noll is an exception, you would not find one business man out of a thousand connected up with business banks and a director of the Railway Company that for \$5,000 would advertise himself as having been such a damn fool." There was the psychology of his point of view but it did not work out.

Now let me give you a case and if you can account for it—I never could. I knew two dental students. Their names were, one Jackson and the other Walling. Walling was a young fellow about twenty-two and Jackson was a fellow about thirty. Jackson, in some way, became acquainted with a very nice young lady who lived in a small country town in Indiana about ninety miles from Cincinnati. He took advantage of her and to conceal that fact from her people and her friends he told her he had arranged to have a physician commit abortion. She came to Cincinnati for that purpose. Jackson thought he knew enough to do that very act himself and to put her in a condition that she would not be aware that he was going to attempt anything of that kind he enlisted the services of Walling and the three of them had some soft drinks. Into the glass of the girl Jackson put cocaine and figured that it would act as an anesthetic and while under its influence he would perform an abortion but she collapsed into a state which he thought was death. As a matter of fact, apparently, it was a case of suspended animation. At any rate when he thought he had killed the girl the next thing was to get rid of the body and destroy, if possible, all evidence of her identity and so prevent the identity of the one who was the cause of her death. Accordingly

Walling and Jackson stripped her of all her clothing, got a conveyance and drove across from Cincinnati into Kentucky outside of a little town called Newport, and on the side of a hill there while a drizzly cold rain was falling—they laid her on the ground, and while Walling held her shoulders down Jackson, with a razor, undertook to cut off her head. As soon as the knife touched her neck and the blood began to flow the girl began to revive but Jackson cut off her head. That head was never found—the reason why may be gathered from a talk that I had subsequently with Walling. He said "Mr. Witte, they will never find that head." I said "No?" He said, I will tell you why—there are two ways of preparing a skull for articulation, one is to bail the brain and flesh matter away from the bone, the other is to bury it in sand where there is running water and this will greatly cleanse it and leave the skull white and polished—the other way leaves it yellow. This girl had a most beautiful set of teeth and Jackson wanted to mount the skull, put it under a glass globe and have it on exhibition in his office after he became a graduate dentist to show these beautiful teeth. This skull was buried on sand bar and the river has come up six or seven feet since then and nobody will ever find it." Can you analyze such a mind as Jackson had?

As I have heretofore stated, you have today, as you had thirty years ago, the burglar, the pickpocket, the forger and so on down the line of the criminal class, but as an element they are in the minority. The predominant class of the criminal element of today is now known as "the stickup man." His professional tool to carry out his work is an automatic. The most notorious bandit of the earlier days was an angel compared to the stickup man of today—the bandit of the early day relieved you of your valuables and went his way—the stickup man of today does not stop with stripping you of what you may have, but if the loot is small or there is no gain, without hesitation, he strikes his victim down with the butt of his gun and thereby fractures his skull or, as in many instances, out of pure wantonness he kills.

The different cases of which I have spoken may have been interesting to, or entertained you, which ever way you take it, but when we speak of Criminal Psychology you cannot help but ask yourself, is it possible to analyze the criminal mind from a psychological point of view and what is the dominant factor which prompts a man to enter into and follow a criminal vocation, and what is the remedy? Lombroso, one of the best known writers upon the subject of Criminalology, claims that the criminal instinct is hereditary. I do not agree with Lombroso. The number of criminals of all classes that I have come in contact with run into the thousands, and I believe that most men who follow a life of crime drift into a criminal vocation because of lack of proper moral and religious training in their youth and have been given too much leeway in the matter of their associations.

Conditions, circumstances and associations have all to do with the shaping of our life. If you go into the fields, among the brush and rocks and take from there and transplant a wild flower to the flower-bed adjoining your home, nurse it and give it attention as it grows and develops, you will find upon its maturity an entirely different flower when compared with its own species that were left to grow up unattended in the field. The want of proper care and training means everything. If you want to see the seedling and the sprouts that sooner or later develop into the professional criminal, all you need to do is to drift into any one of the many pool parlors, soft drink resorts and such class of places, where idlers

congregate, and you will see any number of young men, idling about, without any visible means of support, all dreaming of finding a way to get hold of easy money. It is in such places as these that the criminal element, to some extent, congregate, and it is in such places as these that associations are formed that sooner or later lead to engaging in some criminal act. The temptations in a large city for some form of enjoyment or another that calls for the expenditure of money are without limit. The desire to participate in such enjoyments is the basis of the temptation to take the chance of making the wrong step. Encouragement by one who has already crossed the line is all that is wanting, and it is only a question of a little time that the power of resistance is broken down and the initial wrong step is taken—the second follows more readily and so on until your power of resistance is no longer a factor. It is only a question of time when the criminal then finds himself in the hands of the police. There is a publication of his arrest, his double life is exposed and he begins to feel that in the future among his family and family friends he will be looked upon as a common crook. Whatever pride he may have had leaves him. Here is the turning point. With the proper encouragement and determination he will say "I am through—I have learned my lesson," and so redeem himself. Many have and many have not, and that is why I say that I do not agree with Lombroso—the criminal instinct is not a matter of inheritance but it is something that is created by suggestion, coupled with conditions and circumstances.

During the past few years, as we all know, there has been a crime wave sweeping the country, such as has never been equalled. The criminal element seems to defy all laws. The authorities have been put to the test of finding a way to successfully and effectively control the situation. In our own State, New York, during the last session of the Legislature, the Penal Code and the Code of Criminal Procedure was in many respects amended, the effect of which I believe is beginning to bear fruit. Some people have the idea that the better way to redeem or reform a criminal is to temporize justice with mercy. Mercy is no part of a criminal's code. Let a confederate betray his associates—his punishment is sure to follow. Generally, to use criminal slang, he is bumped off—he disappears in some mysterious way, he is shown no mercy. It is the fear of what will follow in the way of punishment that controls his loyalty to his confederates. You can no more control the criminal element by handling them with kid gloves than you could control a collection of wild animals with petting. The conduct of both classes can be controlled only in the one way, that is by the fear of the punishment that may follow the wrongdoing.

Sending a man to States Prison for a term of years with the knowledge that within a short time, through political wire pulling, and a susceptible Board of Parole he will be out, will not stop crime and criminals. The calling in of political influence to save some criminal does not always wait until he has been landed in some prison to serve his term. As an illustration, some years ago I attended at one of the Courts of General Sessions. It happened to be sentence day in that particular part. The Judge presiding at the time is no longer on the Bench. Among those called for sentence was a young man who had been convicted of larceny. He had been employed with a firm who were dealers in automobile supplies and had stolen something from his employer that was carried in stock. It appeared that it was his first offense. The truant officer who had made an investigation for report to the Court prior to sentence spoke well of him. Witnesses took the stand and spoke

of his prior good character. His employer also appeared, and spoke well of him and informed the Court if a suspended sentence were given they would take him back into their employ. A final plea was made by his Counsel, who dwelt upon the fact of it being the defendant's first offense and of his prior good character as witnesses had testified. His final statement being to call the Court's attention to the fact that the defendant had been married for a little more than a year, to his wife who was then present in Court and that she expected soon to become a mother, to all of which the Court seemed to give great attention. When the defendant's counsel had finished speaking the Court, addressing the defendant, said: "I appreciate all that has been said in your behalf to recommend you to the mercy of the Court but I have a public duty to perform, the fact remains you stand convicted of larceny—the sentence of the court is that you serve one year in the penitentiary."

Immediately following the sentencing of this young man—another defendant stepped to the rail for sentence. As he stepped forward I noticed a gentleman who was standing to one side and near the side rail, whom I happened to know was pretty well identified in politics. As the defendant stepped to the rail the gentleman looked up towards the Court, nodded his head slightly and then slightly to one side toward the defendant. In other words as indicative to say, this is the man. As in the preceding case, a truant officer made his report to the Court—it was not to the effect that the defendant had previously borne a good character, but on the contrary he had twice before been convicted of assault. In the one case sentence had been suspended, in the other a fine of \$25.00 had been imposed. The Court, after hearing the report of the Truant Officer, turned to the defendant and addressing him said "The report of the officer is not much in your favor. It appears that you are here now because of an indictment found against you charging assault with intent to commit robbery. Upon the recommendation of the District Attorney, you have been permitted to enter a plea of guilty to an assault in a minor degree." After a prolonged lecture the Court finally concluded by saying, "I am going to give you another chance—sentence suspended." Such dispensation of justice does not tend to curb either crime or criminals.

As a contrast to the case of which I have spoken, let me tell you of another—A Judge, whom I knew very well, was called upon one day by some friends of a man who had been convicted of a crime and who was to be sentenced on the day following. The purpose of their visit was to induce the Judge to favor the defendant with a light sentence. During the course of their talk, mention was made of the fact that the Judge was a Mason and that the defendant also was a Mason. They had got about so far when the Judge interrupted by saying, "Let there be no misunderstanding about me. I am not a Mason when I am on the Bench. I know no distinction between those that come before me. If there is anything to say in this man's favor which may be considered in mitigation of punishment, it must be said in open Court, where everyone may hear—in this case or in any other case." It is such Judges as this Judge who impress upon the minds of those who have a tendency to go wrong, a feeling of respect for law and justice. To my mind there is but one way to curb crime and control the criminal element, and that is to enforce respect for the law with drastic measures, do away with long delays and when upon trial a man is convicted and sentenced to a prison for such punishment, that it means punishment—such punishment which will make a man hesitate to invite. I do not mean by that to

subject a man to some form of torture—perhaps I can make myself more clear this way. In practically every penal institution in this country the inmates enjoy certain privileges and favors. Entertainments are staged from time to time for their enjoyment, they have ball clubs and other forms of recreation; whatever punishment they suffer by the confinement to a prison life for a term is so in a measure modified. Some years ago I was in England and my business brought me in touch with several of the Police Inspectors attached to Scotland Yard. On one of these occasions the subject of the treatment of prisoners in penal institutions came up, and during the course of the discussion one of the inspectors spoke up saying, "You know, we over here do not commit criminals to our penal institutions for the purpose of giving them a vacation. Over here if a guard is discovered as having permitted one under his charge to have tobacco in any form, or furnish him with a magazine or newspaper, such guard suffers instant dismissal and in addition thereto imprisonment for thirty days." There you have my point.

In all I have said I may not have answered the question of Criminal Psychology—but if what I have said has in any way interested or entertained you—I am very glad to have had the honor and privilege of addressing you.

Discussion

DR. L. W. ZWISOHN:—As the reader of the paper is a man of law and I am a man of medicine I may not be a good judge, but I feel that it is one of the best papers on the subject I have ever heard. He gave us facts and his own experiences, not sociological theories, and this is the most helpful way of approaching the problem. Most writers of papers on this subject take the part of the criminal and express the belief that criminality is a matter of inheritance and question the justice of punishing him for what he cannot control. I agree, as a medical man, with every word the speaker this evening said. Criminality is not inherited; it comes through bad associations and bad conditions of environment. Three thousand years ago Solomon said that if you bring up a child in the way he should go, when he is old he will not depart from it. Any medical man knows that crime occurs, not because the criminal's parents were bad, for often they are of the best people, but because he was beyond their influence. I think the reader of the paper should be congratulated on his work and the Society should be congratulated for the opportunity of hearing it. There is one question, however, I would like to ask. We are today advocating preventive medicine as superior to the treatment of disease after it develops. Why can we not prevent crime? It seems to me this would be easy if the United States Government would pass a federal law that nobody could carry arms, guns or revolvers, without having his name registered. At present there are only certain states that have that law.

HERMAN J. WITTE, Esq.:—I do not think it will ever be possible to suppress crime or criminals. Crime will go on whether the criminals have guns or not and the United States Government could not pass a law preventing any one from bearing arms. Crime is, as Dr. Zwisoehn has expressed it; the youth grows up with bad associations if not curbed or given proper attention. Mr. Fullhardt asked me this evening what I meant by the expression "penny-weighter" in speaking of a certain type of criminal. I did not explain this when addressing you and it may interest you to know what it meant.

A penny-weighter is one who works by himself or with a confederate. He will enter a jewelry store and while pretending to make a possible purchase, in looking over a tray of diamonds or diamond ornaments manage to steal one or more pieces.

As an illustration, some years ago, a gentleman stepped into one of the large jewelry stores in San Francisco, seemingly to purchase a diamond ring. Among the rings in a tray shown him was one valued at \$3,000. He seemed very much interested but the price was too high. He finally made an offer of \$2,500—which was not accepted. In a day or two he again called and again looked at the ring and as before renewed his offer of \$2,500—which was refused. On the following day an elegantly gowned lady called, and explained that her husband had informed her of the ring and his efforts to secure it for her, and his final offer of \$2,500. From its description she felt she must have this ring and suggested that she be allowed to pay

them \$500—of which no mention was to be made to her husband upon his again calling to finally accept his offer, which in effect would enable them to receive their price of \$3,000. The jeweler agreed, and accepted her \$500. On the following day the gentleman again called, explaining that on the following day he and his wife intended leaving the city. The tray as each time before was placed before him to examine the ring and after considerable talk it was placed back in the case. After a little while the same offer of \$2,500 was made and finally after some discussion the offer was apparently with some reluctance accepted, but when they went to the case to produce the ring it had in some way disappeared. The prospective customer apparently became much concerned and insisted, that he being a stranger to them and about to leave the city the next day, the most careful search be made, offering himself to be searched, and suggested that the police be called in at once. When all that was done, the ring was not found and it was conceded that in some mysterious way it had been misplaced. On the following day the lady again called—she appeared in tears, explained that her husband had informed her of the disappearance of the ring just as he was about to purchase it; that she and her husband were leaving the city that day and that she called to have returned to her the \$500 she had left with them. While waiting for her money she dropped her tear-stained handkerchief and in stooping to pick it up—it was for the purpose of locating under the lower molding of the counter the ring where it had been pressed to the moulding with a piece of chewing gum the day before, and as she quietly slipped it into her handkerchief she with the \$500—walked out. That is "penny-weighting."

A VOICE (speaker unknown to stenographer):—How do you account for the fact that after suffering the punishment of imprisonment a man will go out and commit another crime almost immediately?

MR. WITTE:—Did he really undergo any punishment? Sending a man to State's Prison for a term he never serves, knowing that he can get out through some influence with the Board of Parole and the use of a little money, he is bound to go back and commit another crime. From one State's Prison in the West they have been turning the convicts out by thousands.

MR. HENRY S. WILLIAMS (author of "In the Clutch of Circumstance"):—I have had some fifteen years of personal experience behind prison walls, for the past ten years I have been a free man. While I agree with much that the speaker of the evening has said, there are certain matters on which I beg to differ with him. Severe sentences never reformed any man. Besides the question is also one of economics. It costs the taxpayers hundreds of thousands of dollars to support prisoners for these long terms of ten, twenty and thirty years, not to mention the many who are a burden to the taxpayers for life. Furthermore the man who comes out after a long sentence is broken in body, mind and spirit, unable to earn a living and the taxpayer must continue to support him. Our prisons do nothing to prepare a man to make an honest living, so, instead of trying to reform a man by sending him to prison for life why not reform our prisons?

For breaking into the home of Mark Twain I served ten years in the Connecticut State Prison at Wetherfield—I did not learn a single thing in that ten years that would enable me to earn a living when I came out. I was never taught a trade in prison. I came to this country 27 years ago and could not speak or write the English language. I was arrested for a crime which I did not commit and as I could not understand the court procedure nor the language I was unable to defend myself and was sent to prison. Later I was arrested in a Western State and this time I could understand the judge who upon sentencing me said, "My boy, in this free and glorious republic it is every man's privilege to find his own way to Hell. I sentence you to six years at hard labor." The only thing I learned in the six years of my incarceration was to knit socks.

Long terms of imprisonment do not help to make a man nor does severity or prison punishment reform him. My dear friend, Miss Cowles, can verify what I say when I state that in our prisons today men are brutally treated. I have been strung up for ten hours a day and have been confined in solitary for six days at a time on bread and water, for the trivial offense of talking in the dining room. It was through the kindness of friends after my release that I was enabled to secure an education, and write and lecture on these present day prison problems.

MISS GENEVIEVE COWLES:—I am an artist and spent four years, doing a large painting, in the Connecticut State Prison, in the chapel which was in the heart of the prison. I had the greatest admiration for my own State when I went there, and for law and order as exemplified by the authorities, but my

experience there led me to believe that our prison system does not succeed in accomplishing what it is supposed to do. I came out convinced that it was inadequate. It does not do the things it claims to do for the prisoners; it makes them worse instead of better. It corrupts everybody that comes in contact with it. It does not get at the impulse that makes the man commit the crime. The inhibition process does not carry out what we think it does. We should study what leads the criminal to the commission of a crime. If a man is set to making shirts, or shoes, or twine for ten hours a day for all the days of his sentence, how can that reform him? Living like a beast in a cage does not reform him. The criminals are so much more clever than the officials that it gives one matter for thought. I think we ought to have men at the head of prisons who know something about psychology. We should demand qualifications higher than those of political bosses or appointees of prison labor contract concerns. We should study our prisoners materially, and spiritually and scientifically. When a man is full of thoughts and impulses of evil he will express evil. In prison he is impressed most of the time with the fact that he is a criminal. We should make our prisons places in which to educate the men who have gone wrong and to help them to something better. I do not mean we should pamper them; they themselves do not want to be pampered. The men in the prison I speak of had respect for the warden who kept them up to the mark. But to oblige a man to make shoes for ten hours a day as a penalty for committing a terrible act, and then without uplifting him to turn him out on the world to abuse and maltreat someone else, that process accomplishes nothing in the suppression of crime. Doctors treat the individual patient for his peculiar disease. Doctors do not give all of their patients mass treatment, each and everyone alike. The discipline in prisons is not real discipline. It is a system whereby the officials can more easily manage the large number of men under them. We need more intelligent men at the top, if we are going to solve the crime problem.

WM. R. A. KOEHL, ESQ.:—Another angle of the problem is presented in the fact that what is a crime in one state in the union is mere delinquency in another state. We have a striking instance of that at the present time; a youth of 15 years of age is awaiting hanging, in a neighboring state, for assault, and the Governor is being interceded with in his behalf by a number of children's societies so that his punishment shall not be carried out. In this state he would be classed as a juvenile delinquent, but in that state his life is to be taken for the act. Those are the extremes of punishment. We have statutory crimes that in New York would be punished very severely, and in New Jersey would not be a crime. I might dwell for some time on the effect of severity of punishment to reform anyone. I do not believe it leads to the prevention of crime. I do want to dwell on another point, however, and that is bad environment of the young. It seems to be the general opinion that this leads to crime. But that is not always the case. I might give several examples, but perhaps one will suffice. I recently appeared in the Children's Court in Brooklyn on the behalf of a little family of five children whose mother was dead and who had been living in improper home surroundings, the children being on the street most of the time. While their case was pending another case was called, that of a young girl charged with arson. According to the testimony brought out in the examination her home surroundings were of the best and her family was well to do. There was no question about that. Another case was brought before the court, that of a boy of 14 arrested for attempted burglary. He had been caught breaking into an office building. His home surroundings, according to the testimony, were of the best. There was another case, a boy of 12, a pickpocket and a thief, and his home surroundings were of the best, as came out in the examination. The children of the family I represented, whose surroundings were very poor, had never had a wrong act charged against them at any time. The extent of crime today is inexplicable among the young, according to the reports in the papers, under 21, youths of 16 and 18 years of age being charged with serious crimes. This cannot all be due to environment as there are many in bad surroundings who do not go wrong. We cannot work these things out by hard and fast rules. In past years the punishment of hanging was given for larceny and stealing, and yet larceny and stealing persisted. Severe punishment has not been a deterrent to others. On the other hand I know a burly young man, a truck driver, who was locked up for infringement of a traffic law and who broke down and cried at the disgrace of it. Even a year of mere confinement would be a hard thing to such a man. Why some will violate the laws and others will not does not depend on the punishment.

JOSEPH BEIHILF, ESQ.:—The theory of environment is not tenable. We all know that the playgrounds of New York City

children are the sidewalks of New York. Some turn out good and some turn out bad and some go to the Governor's chair and some even higher and some go to prison, and yet all had the same early environment. I have for many years been a keen student of the psychology of crime. There may be something in the gland theory, it may be a peculiar conformation of the brain, some mental twist, but in my experience as a former assistant corporation counsel, I think one of the greatest psychological factors inducing the continuation of crime is the maintenance of the "fence." The question of supply and demand will cause stealing to disappear from the community if the fence can be gotten rid of. He is the psychological factor behind the criminal who steals. If there were no way of disposing of the stolen goods stealing would cease. At present this seems to be difficult to bring about. There was a burglar in this city who was arrested and who testified he sold the results of 200 burglaries to a fence in this city. Many of the articles found with the fence were restored to the rightful owners but a number of diamonds had been removed from their settings and could not be identified so they were turned over to the police custodian. The fence was sentenced to three years in prison but he had influence or money and was pardoned at the end of eight months. He then brought suit for the return of the diamonds, as they had been taken from him and had not been identified as the property of anyone else. The Justice before whom the case was tried could not decide the question and before it went any further the matter was decided in a peculiar way: it was discovered that a policeman, an assistant property clerk, had disappeared with the \$10,000 worth of diamonds. Nobody could say he had not the advantage of the best of environment. A member of the police department had stolen the stolen goods. If we could make the fence suffer more for purchasing the stolen goods than the man who steals them, that would be a powerful factor in removing one type of crime from the community.

DR. R. H. ROSE:—The psychology of the criminal is, in one respect, the same as that of the rest of the community. I believe that if he knew he was going to be convicted and punished, when considering committing a crime, he would not commit it. In England and Canada the criminal is generally convicted and punished. That is undoubtedly the reason their percentage of crime is insignificant as compared with ours. All our coddling of the criminal has failed to reduce crime. On the other hand is the fact that while at one time the Atlantic Ocean was the scene of constant depredations of pirates, today they are no more. Their ships were ruthlessly sunk at sight and those who escaped drowning were hung. Those who might otherwise have become pirates made up their minds it was not worth while, and today piracy is unknown on the high seas.

JUDGE ALFRED E. OMMEN:—This has been an interesting discussion of crime responsibility and criminals and it bears out what I have said many times that you can get points of view as varied as the colors of the rainbow in connection with the discussion of crime problems. It has always been interesting to me to observe how emotions and prejudices control so many people in connection with this question. It is a very interesting and amusing study to observe the psychology of human beings with relation to their prejudices. Pat McCarrin, the Democratic leader in Brooklyn many years ago, rather rudely characterized ninety per cent of all people as chickens, in that they followed somebody who controlled them by their emotions and prejudices. The people who make up this audience are clear headed and intelligent, and yet if I mentioned certain words I would immediately arouse in their minds a prejudice: such words, for instance, as Bolshevik, Ku Klux, Irish, Jew, Protestant, Catholic, Turk, Hylan, Volstead. I have listened to many discussions on crime, have visited many prisons, sat for a few years on the bench, and I frankly tell you tonight that I do not understand it, and I think the great trouble with the crime problem is that most people generally do not understand it. If those who have the opportunity to study it would apply themselves as much to the examination of it as the doctors do, for instance, in trying to solve the problems of cancer, we might get a little further than they have.

It is not a problem that can always be solved by blaming the environment. I have seen criminals who have come from the best families. This one was a black sheep. He went wrong. I have sat on the bench and seen hundreds of men and women going by, week in and week out, occasionally there would pass a face that immediately impressed me as indicating that the person was a criminal. I could not tell you why, any more than a bank teller can identify a counterfeit without being able to explain just why. He runs through hundreds of bills and suddenly he is confronted with one that he throws out. It takes him a little while to determine just why that is counterfeit. It may be the cut of the face, the shape of the head, the look in the

eye, the form of the mouth, the action of the whole body, but somehow or other there has always been to me a something about a criminal that is different from the average person.

I remember the case of a boy, whose father and mother were very worthy people. He had a fine business and a splendid home and the boy was given every opportunity of an education and environment. The boy clearly had a criminal tendency. My court officer at that time, who was one of the best men in the Department, and I determined to see what we could do to save that boy. We gave him every chance possible. We watched him for six months and did everything to get him to go straight. We surprised him sometimes on the street, talked to him in his home, had him join things where he might get a different environment and get in touch with surroundings that would be helpful, but I could not get him to go straight. He could not be reformed by study, emotions, charity, education, environment or home influence—nothing would change him. I have often thought that the only thing that would have helped him was an operation on his head. I do not know whether it is that they are mentally weak or whether it is because they have an abnormal view of life. There are men who have committed crimes who have been in State Prisons but these men are not criminals. When they come out they go to work and never commit another crime. A born criminal will commit a crime every chance he gets. The old time criminal was a warrior. He did not kill unless he was caught in a trap and had to fight to save his life. He never shot down men and women in cold blood like the criminals we have today. The present criminals are mostly drug addicts, cocaine and heroin. The policemen tell me that when they shoot their hands shake and wobble so that the bullets fly without aiming the revolver. The present criminal is not a criminal but a coward. Whether the best plan is to give them good treatment or severe punishment, it seems to me the result is about the same. There are some emotional people who call them "shut ins". There are other people who think that they should be immediately destroyed. To anyone who advises treating them well, I think it is safe to say that we have been doing precisely that thing for the past ten or fifteen years and crime has not decreased. We have had some good wardens at Sing Sing, who have done everything possible for the criminals and yet Sing Sing has more now than it ever has had in its history. There were people that said that drink was filling the jails, but somehow or other there are just as many in jail now as there were then before the Volstead Act. You can treat some of them nicely, educate them and teach them a trade and yet when they come out of prison they will again commit crimes. I am not speaking of those who have made an unfortunate mis-step and who will never go back, but of the born criminal. I do not know whether there is a real criminal class—men and women who were born wrong. People are born in all sorts of conditions, some have a predisposition to this and others to that. Whether these people are born with a predisposition to crime I do not know. We all know somebody in a fine family whom it is a good idea to watch. Sometimes they go through their whole lives without being caught doing anything that is a crime and then again they are caught very quickly.

We cannot settle this great subject by a general discussion of it, because, as I said at the beginning, so many people consider the subject from the standpoint of their emotions or their prejudices, but I do hope sometime, someone will scientifically study this subject, free from emotion or prejudice. Perhaps then we will be able to reach the same conclusion when we study it.

DR. THOMAS C. CHALMERS: There is one type of criminal, not mentioned by the reader of the paper but touched on by Judge Ommen and that is the one brought up in a good home with all there can be to make him lead a straight life and who yet goes wrong. Recently there came to my office an old patient of mine who had moved away from my community. He brought to me his problem about his youngest son, a boy 23 or 24 years old. This boy was the youngest of a family of five and he was a spoiled child from babyhood because he was the youngest. The oldest sister was considerably older than he and she helped to spoil him. Nothing was refused him. He went from one school to another private and public, and did well in none of them. He was going to high-school during the war and he came home one day wearing an officer's uniform saying he had been appointed a captain in the aviation corps. The father knew this was impossible and that he was impersonating an officer. Following that escapade one of his schoolmates got married and he was one of the ushers and he gave them a handsome present, more than he could possibly afford. Just at this time a very valuable Tiffany brooch belonging to the groom's mother was missing. He then sold gold bricks in the form of land in Florida, organized merely to get the money and gave out checks post-dated. Friends of his father loaned him money and accepted these checks. Then the crash came and

(Concluded on page 163)

Experiences With the Repression and Regulation of Prostitution With Emphasis on the Medical Aspects*

HERMAN GOODMAN, B.S., M.D.,

ONE TIME, OFFICER IN CHARGE OF SURGEON GENERAL'S PROGRAMME FOR CONTROL OF VENEREAL DISEASE IN PORTO RICO, PANAMA ZONE, AND OTHER STATIONS. AUTHOR OF CARE OF THE SKIN IN HEALTH, BASIS OF LIGHT IN THERAPY, AND UPWARD OF 150 ARTICLES ON PROBLEMS RELATED TO DERMATOLOGY, SYPHILOLOGY, AND PHYSIOTHERAPY.

New York.

A study made possible by the mobilization of over 12,000 men of the National Army, and the enforcement of repressive acts against prostitution has emphasized the close relation between prostitution and community syphilis. The study is peculiarly interesting in that it was made on the Island of Porto Rico. Although only 40 by 90 miles in area, this island has a population of a million and a quarter. There is very little movement of the people. Immigration and emigration are very slight. The proportion of whites to blacks is about four to one. Mixtures of the two are numerous and in varied proportions.

Prostitution on this island has been a protected enterprise. Until October, 1917, the system of inspection and regulation was in force in the largest city, San Juan. An intricate card system had been in vogue earlier, but during the last years only the "yellow ticket" was used, and a woman possessing one was known as a "card woman."

An "Especial Hospital for Women" had been established in April, 1905, and except for the year 1910-1911, remained open continuously until October, 1917. The "card woman" to legally carry on her trade reported daily at the hospital to be examined. If necessary she was treated in the Out-patient Department, or, if her condition warranted it, she was admitted for bed treatment until rendered non-infectious. Each day that the woman appeared, her card was dated and the result of the examination noted.

For this purpose a staff of doctors, practicantes, and nurses examined, treated and rated the women who either voluntarily or because of police activities, appeared before them.

The reports of this hospital show the extent of the licensed social evil in San Juan alone. There were registered from April 16, 1912, to October 12, 1917, 1691 women of whom 518 were registered for the first time during the four years from July, 1913, to July, 1917.

A copy (translation) of the report of the last full year of the hospital, (Report of the Mayor of San Juan to the Governor, Fiscal year (1916-17.) shows 1540 women clinically examined at the outpatient department, and 338 admitted for bed treatment.

ESPECIAL HOSPITAL FOR WOMEN

Chart Showing the Cases Treated from July, 1916, to July, 1917

Out-Patient Department:	
Women clinically examined	1540
Women examined for the first time.....	117
Treatments	46858
Hospital Bed Patients:	
Treatments	13907
Cases remaining June 30, 1916.....	38
Cases admitted to hospital.....	338
Cases discharged	336
Cases remaining June 30, 1917.....	40
Died	0
Diseases treated:	
Gonorrhea	332
Chancres	314
Syphilis	40

* Read before The Society of Medical Jurisprudence, New York City, November 8th.

Secondary syphilis	30
Ulcers of cervix uteri.....	52
Adenitis	15
Ulcerating adenitis	11
Bartholinitis	21
Abscess of vulva.....	8
Abscess of other parts.....	19
Veneraeal warts	26
Condylomata	11
Measles	3
Typhoid	3
Abortions	2

In other cities of the Island, the card system was not used, but the police registered the public women and in some measure kept the industry on a peaceful basis.

The San Juan "Especial Hospital" was discontinued at the time that Federal officers advised the municipality that such a hospital in view of the opening of the army cantonment within five miles was illegal.

The confinement of a large number of prostitutes through the activities of the Attorney General of Porto Rico (See Special report to the Governor, etc.) made medical examinations possible. At the Hospital Jail of Ponce, 43 women among the 332 confined or more than 12 per cent had infectious syphilitic lesions. The lesions had been all neglected and none of the patients had any treatment prior to admission. Of the lesions seen, we had:

Chancres	13
Mucous patches	2
Condylomata lata	19
Skin syphilides	8
Congenital syphilis	1

The routine blood Wassermann test was done on all patients. The number of four plus Wassermann tests on women without lesions was 119. The percentage of women who were without lesions but had four plus Wassermann tests was 42 per cent. This indicates that this number at least were in the latent tertiary stage or the stage of potential active syphilis. The syphilitic index was 50 per cent since 165 of the 332 women were positive clinically and serologically.

In the San Juan institution, we found two cases of chancre; one case of syphilitic ulcers of the cervix; one case of incised and ulcerating iniquinal adenitis; one case of secondary macular papular syphilide; and ten cases of condylomata lata. On routine blood examination of all patients, we found 62 with four plus positive Wassermann reactions.

At Arecibo, the social diseases among the 332 women were especially prevalent. Twenty per cent of the women had active infectious syphilitic lesions, and seventy per cent gave four plus Wassermann reactions.

At the three jails, 12 per cent of the women had dangerously infectious syphilis. Forty-two per cent more on routine blood examination had four plus positive reactions. Since the Wassermann is effective in only 80 per cent of latent tertiary syphilis, this indicates that eight per cent more were in the latent stage, free of lesions, in whom one examination did not give the positive results. The true index of syphilitic infection among the women is therefore, 62 per cent.

Comparative figures from Vedder, "Syphilis and Public Health"—are very interesting.

"Average figures are probably given by Kneeland, who says that the records of the Bedford Reformatory for girls show that 20.56 per cent of the 647 inmates have clinical manifestations of venereal disease. With the Wassermann test, 224 or 48 per cent have positive reactions, and 30 or 6.4 per cent of the inmates of this reformatory are syphilitic. Walker in an examination of 327 prostitutes in Baltimore found that 57 per cent gave a positive Wassermann reaction.

"Sullivan and Spaulding find among 63 women arrested for alcoholism only, syphilis was found in 42.8 per cent, while 9.6 per cent show a doubtful Wassermann. Among 94 women arrested for alcoholism and other offenses, syphilis was found in 46.8 per cent, with 14.9 per cent more showing a doubtful Wassermann. Among 243 prostitutes syphilis was found in 65.5 per cent with 9.5 per cent more showing a doubtful Wassermann. Among the entire 500 consecutive cases who were all regular or irregular prostitutes 44.7 per cent were undoubtedly syphilitic, while 9.5 per cent more had a doubtful Wassermann."

In 1899 an American Army of occupation came here. Its venereal admission rate for the first six months was 467.80 per thousand. (Reports of Military Governor of Porto Rico, 1899-1900.) Nearly a fourth of the command were victims of syphilis, gonorrhea, or chancroid, rendering them ineffective. At this time the venereal rate for the continentally United States was 84 per thousand. This marked difference between armies at home and at colonial stations is paralleled by the rates for the British troops at home and in India.

The average rate for the Spanish troops stationed at Porto Rico prior to the entry of the Americans was for the five year period from 1889 to 1893, 338 per thousand; and from 1894 to 1898, 431 per thousand. 1898 gave 566 per thousand which was the highest recorded. More recently, conditions were such as to warrant placing San Juan on the "black list" of visiting navies. From 1903 to 1919 no warship of any nation has allowed shore leave at this port, which is only six miles from where Camp Las Vasas was organized.

On the entrance of the 12,000 men to the training camp, they were especially scrutinized for the venereal diseases including syphilis. There were registered at the Venereal Office:

Chancres	30
Secondary syphilis	18
Tertiary syphilis, mainly scar cases.....	124

On routine examination of enlisted cooks and bakers, 74 of 279 or 26 per cent were four plus positive.

Of 22 civilian cooks, whose ages were not limited to 31, we had seven with a four plus reaction or 33 per cent positive for syphilis. In these studies we do not include the inconclusive results of one or two plus positive reactions.

It is interesting to compare these figures with those obtained in other sections of the United States. Pusey in "Syphilis as a Modern Problem" states:

"The best estimates that we have in America come from some examinations of men in the public service. Reasoner from a study of one regiment of the United States Army estimates that seven per cent of the men were syphilitic. Bartlett for another regiment estimated that ten per cent were syphilitic.

"Vedder and Hough from a valuable study of 1,283 cases in the government hospitals for men in the public services from all parts of the United States estimate that ten per cent represents closely the prevalence of syphilis among the men in the United States.

"Nicholas of the United States Army, who has given great attention to the subject of syphilis in the Army believes that for the army as a whole the rate is something over five per cent, and contrary to the common impression, that syphilis has a high percentage in the army, brings forward good reasons for believing that the prevalence of syphilis is not higher in the army than among men in general of the same age."

Craig in "The Wassermann Test," says:

"The most important and conclusive contribution to our knowledge of the prevalence of syphilis in the army, and consequently, in civil life, has been made by Lieut. Col. Vedder, who published his results in 1915. . . .

"In his work, Vedder considered that all cases giving a double plus (four plus) reaction were without doubt syphilitic, while those giving a plus (three plus) reaction were probably syphilitic."

• OCCURRENCE OF SYPHILIS IN THE ARMY FROM VEDDER

Classes	Total tested	Estimated total number of probable syphilis %
Recruits	1,019	16.77
Cadets	621	5.46
White enlisted	1,577	16.08
Colored enlisted	1,472	46.00
Porto Rican Regt.....	531	55.93
Military convicts	1,145	21.65
Insane soldiers	567	19.21
Tuberculous soldiers	229	39.00
Soldiers home	1,171	34.75

It is especially interesting to note from the above table that the estimated total number of probable syphilis among the Porto Rican Regiment is 5,935, the highest recorded. This number closely approximates the figures obtained for the prevalence of syphilis among the prostitutes on the island, sixty-two per cent. It should be remembered in this connection that the Porto Rican Regiment is one in which the period of service for each member is long since most of the men have repeatedly

It has elsewhere been noted that syphilis may be reported under many a disguise. Special note should be made of the classification table, where 3520 deaths are reported as congenital debility, rickets, neglect, etc. It is impossible of course to determine how many of these deaths may have been due to syphilis as the main or even contributory cause without autopsies and serological studies, but undoubtedly the number is high.

That the main source of infection is the prostitute, and that with her isolation new cases of syphilis among the men of the community and from these to the women and children cease, was definitely proven in Porto Rico. The repressive measures made it difficult for the prostitute to ply her trade, and the number of syphilitic infections among 12,000 men in camp for six months was kept down to four. See The Porto Rican Experiment, Social Hygiene Quarterly, April, 1919. The civilian population fared almost as well, but here we have to depend on the statements of the various specialists practicing on the island rather than on official statements. The confinement of over 800 public prostitutes, 12 per cent of whom had infectious lesions of syphilis, certainly reduced the incidence of new infections. The number of possible infections looms tremendous when we consider that these women had been receiving visits from five to ten men a day. While in the jails set aside for them, the syphilitic women received the most modern and intensive treatment with salvarsan and mercury, for it was realized that they could only be held until their sentences expired and that it was not possible to keep them from practicing their profession on their release. Treatment of all infected with syphilis is the only way

to stamp out this scourge of the race. Temporary spasms of virtue are necessary and effective for times such as we have just passed through, when national emergency requires immediate and strenuous procedures. Porto Rico had the opportunity to make syphilis a thing of the past. A good beginning had been made. Fresh cases can be kept out. The old cases can be cured, and new infections rendered impossible. In the past decade, this island should have been the example to all the world as the test tube experiment which proved that syphilis need not be.

Comparative Chart Showing Diseases and Where Acquired by Men Prior to Entry into the Service, and the Number of Women Sentenced at the Municipal Court for Those Towns From July to September 17, 1918.

	Ure- thritis	Syphilis	Total	Wo- men sen- tenced	Other- wise dis- posed of
Municipal Court—					
<i>Adjuntas</i>					
Adjuntas	2	1	3	22	0
<i>Aguadilla</i>					
DAguadilla	9	2			
Aguada	2	1			
Isabella	4	0	18	45	7
<i>Añasco</i>					
Añasco	1	0	1	2	3
<i>Arecibo</i>					
Arecibo	14	8	22	71	1
<i>Barros</i>					
Barros	1	0	1	0	0
<i>Bayamon</i>					
Bayamon	13	5			
Comerio	1	1			
Dorado	1	0			
<i>Cabo Rojo</i>					
Cabo Rojo	3	1	4	21	0
<i>Caguas</i>					
Toa Baja	1	0	22	21	1
Caguas	29	8			
Gurabo	0	1	38	73	4
<i>Carolina</i>					
Carolina	4	3	7	2	0
<i>Cataño</i>					
Cataño	3	0	3	0	0
<i>Camuy</i>					
Camuy	1	0			
Hatillo	1	0	2	23	4
<i>Cayey</i>					
Cayey	4	1			
Aibonito	2	1			
Guanica	1	3			
Cidra	1	0	13	0	0
<i>Ciales</i>					
Ciales	1	0	1	0	0
<i>Coamo</i>					
Coamo	5	2	7	13	0
<i>Fajardo</i>					
Fajardo	1	0			
Ceiba	1	0			
Naguabo	1	1	4	3	4
Municipal Court—					
<i>Guayama</i>					
Guayama	13	4			
Aguirre	0	2			
Arroyo	2	1	22	0**	0
<i>Humacao</i>					
Humacao	5	2	7	4	4
<i>Juana Diaz</i>					
Juana Diaz	5	4	9	18	5
<i>Lares</i>					
Lares	0	1	1	12	3
<i>Manati</i>					
Manati	4	2			
Barceloneta	2	0			
Morovis	1	0	10	39	0
<i>Mayaguez</i>					
Mayaguez	35	6			
Hormigueros ..	1	0			
Maricao	0	1	44	82	4
<i>Patillas</i>					
Patillas	0	1	1	3	0

<i>Ponce</i>					
Ponce	48	30			
Guayanilla	3	3			
Peñuelas	2	1	67	127	29
<i>Puerta de Tierra</i>					
Puerta de Tierra	1	1	2	0*	0
<i>Rio Grande</i>					
Rio Grande	0	0	0	0	0
<i>Rio Piedras</i>					
Rio Piedras	3	1			
Guaynabo	1	0	5	22	1
<i>Salinas</i>					
Salinas	3	1			
Santa Isabel	2	0	6	1	1
<i>San German</i>					
San German	6	4			
Lajas	2	0			
Sabana Grande ..	1	0	13	18	9
<i>San Juan</i>					
San Juan	21	0	21	0*	0
<i>San Lorenzo</i>					
San Lorenzo	1	2			
Juncos	3	1	7	0	7
<i>San Sebastian</i>					
San Sebastian ..	2	0	2	9	7
<i>Santurce</i>					
Santurce	7	5	12	0*	6
<i>Utua</i>					
Utua	4	2	6	19	0
<i>Vega Baja</i>					
Vega Baja	7	1	8	13	0
<i>Vieques</i>					
Vieques	4	3	7	10	1
<i>Yabucoa</i>					
Yabucoa	0	1	1	0	0
<i>Yauco</i>					
Yauco	8	8	16	28	12
<i>Martinique</i>					
Martinique	1	0	0	not in Porto Rico.	
<i>Santo Domingo</i>					
Santo Domingo ..	2	1	3	not in Porto Rico.	

The Venereal Diseases on the Canal Zone

The special phase of the venereal disease problem that makes it especially difficult to control here is the decentralization of the people involved. We have the Panaman Government, the Canal Commission, the United States Army and Navy, and the huge number of transients that pass through the canal, and stop at either, or both of the terminal cities.

Venereal diseases have been the source of many admissions to the hospitals of the Zone. The figures are here given which show them to rank first or second highest since 1915:

	1915-16	1916-17	1917-18
Venereal disease	575	533	563
Malaria	983	419	457

Since the American occupation, statistics show a fairly constant rate to hospital or quarters of 12½ per cent from venereal disease. Since 1904 there have been 27,633 cases treated in the Canal Zone by American physicians, most of them being employees and their families and from the Military. When it is understood that such employees are heavily penalized as "fault" cases, and as a result many of them secure treatment of private physicians even these figures are small. Many of those infected are hopelessly diseased, paralytics, tabetics, insane, blind, heavily penalized by easily preventable diseases.

During the second half of 1918, 50,184 men seeking admission to the segregated districts of Panama and Colon were examined. For the first three weeks, 12 per cent of those examined had venereal diseases in their infectious form.

*These cities were in ten mile zone and at this time no women were either denounced or arrested before the Municipal Court.

**This city was very lax in its campaign. Later reports show women arrested.

The result of routine inspections in soldiers reporting from the United States to the Zone for duty have shown them to have but a low rate of infections since the regulations strictly forbid the transfer of a soldier with symptoms of venereal disease. Wassermann survey show that 10.9 per cent were positive.

Navy vessels coming to port of the canal restrict all men with venereal diseases so that they do not get shore leave.

The employees of the Canal Commission, like the Army and Navy, come to the Zone free of active manifestation of venereal diseases. The proportion of persons probably infected with syphilis may be summarized from the report of positive Wassermanns at the Ancon Laboratory. During the year 1917, 9,561 were examined by Wassermann test:

Classes	Sex	Per cent
Adults, civilian, white.....	Male	12.5 positive
Spanish and white natives.....	"	22.9 "
Spanish and white natives.....	Female	15.6 "
Black and Mulattoes	Male	32.8 "
Chinese	"	30.7 "

The permanent residents are given every assurance against newcomers importing disease, through medical inspection and quarantine. All too often the transient takes from our cities an awful reminder in the guise of a venereal disease infection, which he probably acquired through the false assurance of the efficacy of the system of regulation. During the three months ending August 30, 1918, 759 vessels entered the ports of Colon and Panama, and 42,547 persons were inspected. These were months during which the shipping conditions were abnormal because of the war. It is no idle dream to consider that in a short time this will be the world's largest shipping center. Shall it also be the distributing point for its venereal diseases? Shall the venereal infections among the thousands of sailors of the great fleet which has just passed, cause the Navy Department to send its ships through the Canal with orders to restrict all shore leave in the future?

The need for the conservation of man power has been shown by the great war, and in every portion of the globe an effort is being made to reduce the needless loss caused by mankind's enemy, venereal diseases.

The Health Department of Panama on June 21, 1918, found that there were 231 registered prostitutes in the segregated district, 175 registered prostitutes outside of the district, and located 302 clandestines who were unregistered. Ninety-one per cent (209) of those in the district were found to have syphilis or gonorrhea, or both. Ninety-five per cent (167) of those registered outside of the district and 98.5 per cent (279) of the clandestines were found similarly infected. Every infected woman was sent to the Santo Tomas Hospital. The syphilitics were given salvarsan and mixed treatment and were rapidly put through the infectious stages. The gonorrheal cases were given local treatment and douches and kept in bed. By August 21 there were 495 registered prostitutes in the district, 311 of them being in the hospital. Many clandestines had left the city. reenlisted since the regiment was first formed in 1900.

We were able to determine that 96 or 53 per cent of 178 drafted men acquired the disease between the ages of 20 and 24 years, inclusive.

For comparison, the age at which gonorrhea was acquired is also given. 108 or 52 per cent of 208 drafted men acquired gonorrhea for the first time between the ages of 20 and 24 inclusive.

We learned also the city or town where 128 men acquired syphilis and 307 patients acquired gonorrhea. We tabulated the figures side by side with those showing the number of prostitutes sentenced or otherwise disposed

of in those towns. Of course the number of infections acquired does not follow with geometrical exactness the number of women convicted of prostitution in the towns where the disease was acquired. The cities that had prostitutes in large numbers naturally gave us many cases, but more remarkable still, the cities from which no cases of venereal disease came to camp had no women either denounced or arrested as prostitutes.

It is not possible to give further accurate statistics on the prevalence of syphilis among the women of the island since the reports to the Board of Health are not complete nor accurate. The reports of causes of death are notoriously unreliable since syphilis is seldom given although the fatal disease may have had a syphilitic origin.

The report of still births and miscarriages is interesting and may throw some light on prenatal syphilis. The total number of viable births for the year ending June, 1918 was 43,261. During the same period 16,002 deaths of children under five years occurred. The table gives the classification.

Stillbirths	3,797
Enteritis in children under two years.....	4,289
Enteritis in children between 2 and 5.....	3,452
Congenital debility	1,213
Rickets	927
Meningitis, broncopneumonia, tuberculosis heredo-syphilis, heredoalcoholism, etc.....	778
Neglect	602
Umbilical hemorrhage, neonatal cyanosis infectious omphalitis, atelectasis, etc.....	171
Whooping cough	143
Diphtheria	50
	16,002

This total represents 46.44 per cent of the general death rate for all other ages and diseases, and is detailed as follows:

Children who died under one year.....	21.77
Between the ages of 1 and 2 years.....	12.14
Between the ages of 2 and 5 years.....	12.53
	46.44

In Colon, on June 21st, 299 registered prostitutes were found in the district, of whom 285 were infected with syphilis or gonorrhea, or both. Outside of the district 157 registered prostitutes were found, of whom 151 were infected. Publicity was given the campaign in such a way that clandestines soon left the city. The infected were sent to the Colon Hospital or Santo Tomas Hospital and run out of the city, so that by August 1, there were 137 registered prostitutes in the registered district, of whom 106 were infected, segregated and under treatment. There were no registered prostitutes outside of the district, and very few clandestines.

From July 15, 1918, to August 1, 1918, 426 women were, either willingly or because of Police and Health activities, registered in the City of Panama as prostitutes. Six weeks later, that is September 17, 1918, 157 were reported as having failed to return for examination. Of these 157, 97 had double plus Wassermanns, 6 a one plus, 3 doubtful, and only 45 negative Wassermann reactions. Twelve were not reported on.

Up to August 18, 1919, a total of 655 women had been registered at the Santo Tomas Hospital. During the week ending August 11, 1919, 49 women had reported for examination. The week previous, ending August 4, 1919, 53 women were examined; and the average weekly number for the past month has been 54.

In Panama, then, as elsewhere, wherever regulation has been given an opportunity to prove its vaunted advantages, it has failed and failed miserably.

Coco Grove, the supposed segregated district in

Panama City, has but a handful of prostitutes. Repeated tours of the Provost Guards and the Military Police have convinced them that Coco Grove is dead. What registered prostitutes there are have moved out of the district into other parts of the city.

It would take a most optimistic mind to believe that regulation exists in this city to-day.

The conditions in Colon beggar description. The city has a red light district of several squares, in which some 125 women are residing. Saloons and dance halls of the vilest sort are in every house, and every night hundreds of men, and mostly young men, crowd the district, loiter about the doorways of the saloons, or chat with the scantily clad women of the street. Many of the women have their rooms fronting the street, the doors are wide open and the lady sits cross-legged, smoking on a rocker, inviting men. Other girls pass through the crowd of men on the street, calling, caressing, pinching—advertising the sale of their bodies.

In the dance halls the dances are passionate to the extreme, and every phase of the sex-act is mimicked, to the applause of those sitting at the serving tables or grouped about the doors. The waiters steer through the dancing couples from the bar to the tables. Girls are sitting on men, drinking from the same glass, and distributing caresses regardless. In every alleyway two or three women, with abbreviated skirts sit smoking and calling to the passers-by.

Numerous policemen patrol the district, but there is only an occasional fight, and this is soon quelled. The military police and naval patrols go through the district, since the place is restricted to men in uniform. However, the soldier and sailor need not depend on the denizens of the district, since outside of the district, in the small "cantinas," along the darker streets, in the back alleys, and even in large cabaret shows, girls are found eager to part the soldier and his money. Various estimates by the police give the number of so-called clandestines or unregistered prostitutes as 300 in the city of Colon.

Nominally, a system of regulation and medical inspection exists in this city; as a matter of fact, perhaps less than a third of the known prostitutes have cards, and these are examined weekly. The examinations are conducted by four physicians who alternate weekly. For each examination a dollar is paid. This the doctor keeps as his fee. The examinations I saw conducted, and I am assured by talking to the girls that it was a special examination, compared to the routine, is done in a poorly lighted room, on a wooden table without sheet or covering. No nurse is present. The doctor brings two specula which are sterilized (?) by dipping into an improvised sterilizer over an electric stove of the type ordinarily used as a table break toaster. The water is not boiling, and apparently to help sterilization the doctor added several tablespoonfulls of Lysol to this luke warm water. Without gloves, the doctor separates the labia, inserts the speculum which is greased with boric ointment, looks at the cervix, and the examination is complete—no smears, no stripping of the urethra. Since every woman takes a douche previous to the examination any evidence of the existent gonorrhea is washed away for the time. Women with known lesions do not appear for examinations! If the woman is menstruating she shows a bloody rag to the doctor, and is not examined further. She pays her dollar just the same. It takes the doctor longer to rubber stamp his name on his certificate than to examine a patient. In the last month, of approximately 120 women examined each week but 6 have been sent to the hospital for smears or for blood Wassermann.

As the girl leaves the examination room her name is taken by an "honorary inspector" appointed by the Mayor who receives his wages from the different doctors. He averages about 10 per cent, or fifty dollars per month. It is said of the inspector and his predecessors that if the girls paid him fifty cents they were not reported, and did not go for the examination. More conscientious inspectors in the past are known to have collected the dollar at the girl's room, taken it to the physician, and carried the doctor's certificate to the girl.

Another interesting, although perhaps disgusting phase of the examination (?), is that there are at least 12 or 15 women who are given to abnormal practices alone; but the routine superficial vaginal examinations suffice for these, as if rectal gonorrhea or mucous patches of the tongue were unknown. Such is regulation in Colon.

Much has been written regarding the results of a recent quarantine against the Republic of Panama, and it might be well to give the results in terms of venereal disease.

During the first six months of 1918, prior to the quarantine order, 451 men of the army, in a command averaging about 11,000 men, were infected with venereal disease. For the next six months of 1918, after the quarantine order, there were only 35 cases, and 15 of these were reported in the month of July and were probably infected during the previous month, but the incubation time put the disease into July. There were five months under the closing order in which the average number of newly acquired venereal diseases among a command of 11,000 men averaged 4 per month. To quote from one of the circulars issued at that time: "There are approximately 1,059 young men who will be returned to their homes in good health who otherwise, to a certainty, would have been diseased; the greatest proportion of whom would have been permanently diseased; besides the number who would have acquired habits in the use of alcohol and narcotics."

The number of prophylactic treatments dropped from a monthly average of over 1,850 for the five months preceding the order, to 19 for the month immediately following. Is it any wonder that the business of prostitution fell to a non-paying basis, and that the profiteers of the industry sought by every means in their power to have the restriction raised?

On February 28, 1919, Order and Decree Number 3 of the Governor General ceased to be in effect, as the civil governor resumed his functions. This Order and Decree prohibited the entrance of prostitutes or of liquor into the Canal Zone and had been vigorously enforced under the Governor General. Under civil control, Order and Decree Number 3 becomes a dead letter. The sudden rise in the venereal disease rate of the department from 0.569 in February to 3.47 in March and its maintenance between 4 and 5 per 1,000 until June is the effect. During these months, March to June, the strength of the command dropped from 11,000 to 4,600.

On July 16, 1919, G. O. 26 was relieved and passes issued to those men in whom the commanding officers had confidence. The venereal disease rate for July was 8.4 and for August, the rate was 18.1 per 1,000—84 cases among 4,600 men; or two and one-half times again as many as among 11,000 men for the last six months of 1918.

The number of prophylactic treatments as indicating the number of exposures was 100 in June; 571 in July, and 1,209 in August. It must be borne in mind that the command is about a third of what it was when the monthly prophylactic treatments given were 1,850.

The steps recommended for the consideration of a

joint board empowered to act for the various interests on the Zone, the Panama Government, the Army and Navy, and the Canal Commission, which latter in its health activities includes the transients, have been tried with much success elsewhere during the past year, and there is every hope that they can be successfully introduced and maintained here.

The first of these steps is the acceptance of the method of abolition; that is, the abolition of the recognition of prostitution as a legitimate manner of earning a livelihood, and the special privileges given to registered prostitutes.

It has been satisfactorily shown that the system of regulation has failed here.

The second step is that the Republic of Panama Decree Number 12 of 1918 have all its provisions for the segregation and the establishment of registration deleted. This will in fact, be reverting to the passage of laws based on the standard issued by the U. S. Public Health Service.

Under these laws, the suppression of prostitution and, in turn, the venereal diseases becomes a police and health measure. The state will no longer be a partner to the business of prostitution, and those practicing prostitution will be prosecuted for infraction of the law. Those who exploit the prostitute will also fall within the tolls of the law, and the punishment meted out to both male and female will discourage the business. Sentences to confinement at the jail or hospital will make prostitution a non-paying proposition, rather than the profitable one it now is for women and the house-owner. This will be a great factor in limiting the rate of venereal diseases.

Deportation of prostitutes will reduce the number of women registered by one-third, as there are 224 foreign-born in Panama City. Many others could be returned to their homes in the interior from whence they came. Others again, city born, will return to their homes and to a normal manner of living. For some, jail sentences must be given until they learn to obey the law.

The reclamation field is, of course, a great one among this class of women, but to delay until a rehabilitation farm, a home for feeble minded, and the other agencies are available will mean hundreds, if not thousands, of new infections.

These things are bound to come with the educative measures that the programme presents. The revolutionary change from regulation to suppression will in itself bring to the attention of all right-minded persons the need for future care of the unfortunate.

The measures for securing treatment of all infected with venereal disease have already been made a part of the law. Opportunity for treatment can soon be available in Panama.

Freedom from disease, in the infectious state, can be made a part of the quarantine regulations if they are already not so constituted, and treatment prior to entering can be enforced.

Free treatment for the indigent, and enforced treatment for the careless and the spreader of disease, which includes the prostitute, can be given as at present.

The Army and Navy have their own routine, which assures us of isolation of all in the infected stages of venereal disease.

The Canal Commission should reduce the penalty for "fault" cases to encourage the employees to present themselves early for treatment. The health records should be made confidential.

The reporting of venereal disease should be carried on as at present, but it is a most unsatisfactory method. The records of the Health Department of Panama City for month after month show no cases reported. A free labo-

ratory service for the Wassermann Test and for the demonstration of the Spirochete Pallida (the cause of syphilis) and the Diplococcus of Neisser (the cause of gonorrhea) will be a much more efficient method of securing the data desired.

The expense of such an undertaking seems to be that of the Panaman Republic; however, so is that of malaria and yellow fever control, which nevertheless have been taken over by our Government as a health measure for the Americans occupying the Zone. It should take no widespread imagination to put the venereal diseases in the same category and under our own financial care. Certainly diseases like syphilis and gonorrhea rank with malaria; and we have shown that our hospitals take care of as many of one as of the other. The permanent bad results of the venereal diseases are much worse than those of malaria, and the community interest is certainly greater.

Were the intermediate cause of syphilis a mosquito or a fly, their extermination at any financial cost would never be questioned. Unfortunately, even the most enlightened still seek to hide the business of prostitution, to avoid bringing it into light; and those whose business it is, and who profit therefrom, are only too eager to help in this endeavor.

One need not think that we need to beg money, to solicit from the Red Cross, or the Salvation Army. We should go direct to the source of all our funds, present the problem as a money proposition, and ask for a sufficient appropriation to carry on the necessary work. Every dollar expended in reducing a prostitute to a non-infectious state means hundreds of dollars saved in treating, a soldier, a Canal employee or a sailor.

At this time there is a great wave of righteous reform sweeping over the lawmakers, and they have learned to appropriate great sums in the battle against avoidable diseases. Nowhere better than on the Canal Zone can even small sums of money give big returns in better health for all.

Thanks are extended to Col. Fisher, Chief Health Officer of the Zone, and to Col. Greenleaf, Department Surgeon, for their cooperation and for placing their excellent records at our disposal.

Discussion

RAY H. EVERETT, Esq. (American Social Hygiene Association:—As an associate director of the Social Hygiene Section of the War Department's Commission on Training Camp Activities, I had a good opportunity to keep track of the army program for the control of venereal diseases—a program which resulted in what has been called "the cleanest army in the world's history." Many of us were greatly interested in Dr. Goodman's work in Porto Rico, and the reports indicate that this work was most effective.

San Juan and the other cities of Porto Rico in attempting official regulation of prostitution furnished merely another example of the failure of such efforts. May I refer you to Flexner's "Prostitution in Europe," the report made by Mr. Flexner of his studies of reglementation in various European cities. This report shows how complete a failure it has been there and we know that it has failed in our own country, for many cities tried it out and gave it up.

As an illustration of the failure of reglementated prostitution to protect against syphilis and gonorrhea, I recall one cantonment where a large number of venereal disease infections were traced to a small, nearby town in which there were four brothels, housing 31 inmates. The mayor of this little town, the chief of police, and the local doctor had had charge of the situation and each inmate of the district was supposed to be medically examined twice a week. In spite of this the venereal infections still continued. Finally, it was necessary for the state constabulary and federal troops to raid this district and conduct the inmates to detention quarters. There, when they consented to medical examinations by official physicians 29 of the 31 were found to be infected with either syphilis or gonorrhea, or both, in spite of the supposedly careful medical regulations under which the houses were being operated. In some parts of the Continent and South America

official regulation is still kept up as a police measure because the authorities have believed in the past that it enables them to know where may of the prostitutes are and also that they can keep track of other criminals who consort with them. The police authorities of Berlin in explaining the system of regulation to an American visitor said that they had approximately 5,000 registered prostitutes, but that the number of those in the profession of prostitution who were not registered numbered approximately 50,000. Much the same figures have been reported for Paris. These examples illustrate the futility of attempts at official regulation and show the wide "scattering" of prostitution under the regulation system. As to the moral situation, those who have studied the subject from social, economic, legal and ethical angles agree that the system of official regulation has not a leg to stand on.

DR. ABR. L. WOLBARST:—I regret to say I've no experience in the army and especially in Porto Rico, so it is impossible for me to add anything about military medicine to the interesting recital of my friend, Dr. Goodman. But there are a few matters which I should like to comment on and a few questions to ask.

In the first place, speaking of the women and soldiers examined for venereal disease, Dr. Goodman mentioned the cases in which the diagnosis of syphilis was made solely because the Wassermann reaction was positive. I venture to say that this was an utterly erroneous interpretation of the Wassermann reaction. Neither the United States Army nor anybody else is justified in calling a person syphilitic because a laboratory worker somewhere, particularly in the tropics, found a positive Wassermann in the patient's blood. The consensus of opinion, among syphilographers, I believe, is that the Wassermann reaction *per se* is not an absolutely positive evidence of syphilis. In his excellent new book on Syphilis, Dr. Stokes, undoubtedly our greatest living authority on syphilis, states that the Wassermann reaction not only is susceptible to error in its performance but also in its interpretation. These errors are being made every day, unfortunately I am sure they were made in relation to some of the soldiers and prostitutes in Porto Rico.

The speaker referred to the 18,000 men in his charge, with money in their pockets during a three days' holiday and no place to go to, because all the brothels had been put out of business. These men had been kept under strict surveillance for six months and only twenty cases of venereal disease developed during that entire period. Well, that might be considered a wonderful record from the standpoint of the army surgeon, but I cannot see anything remarkable about it, considering the fact that the women were either in jail or in hospital and the men could not get near them. Eighteen thousand men trooped up for six months without the possibility of carrying on the sexual life to which they were accustomed, was nothing short of cruelty. Granting that these men might have become infected with venereal disease, I think it was an unjustifiable act to deprive them for six months of the gratification of a normal and natural impulse and desire. It was the business of the army surgeons to see to it that these men were treated prophylactically, and then, if the venereal disease incidence was found greatly reduced, they would have something to crow about. I believe that governmental authority was not exercised properly in that particular case, even with all the good intention back of it. I should not feel proud of this report. I should like to ask if the army surgeons took the trouble to study the mental and psychic reactions of these 18,000 men during and after those six months.

The most serious part of this discussion lies in the unfortunate fact that the same methods of repression that were employed on prostitutes and soldiers in Porto Rico and Panama and other tropical places, are being forced on civil communities in the United States under what is known as "The American Plan." I do not think it is wise, nor expedient, nor even decent for governmental authority under the guise of morality, to drive the prostitute from pillar to post, making her a pariah wherever she goes. She is just as much a human being as any other woman and with equal inalienable rights. I have a very high regard for some of the prostitutes whom I have met in my professional work, and regard them as more human and much more humane than some of the "good" men and women who take a sadistic delight in driving these unfortunates about.

What is society's duty toward these women? Is it right for society backed by the police power to drive these unhappy beings from one place to another? I have here a record of the "clean-ups" in about 200 American cities. It is declared to be a wonderful record. But when these good people clean up a town do they ask where the women go to? What becomes of them? Surely, they are not reformed; they are not dead. Where are they? The morality forces who bring about these "clean-ups" do not answer these questions. But here is an answer from the Health Officer of a large city in the West, which is very illuminating. It is an answer to a questionnaire which I sent out to several hundred Health Officers throughout the country. I will read it to you. He says naively: "Some have quit and gone

to work; some have opened small shops, as candy and soft drinks; some are employed as waitresses, chambermaids and rooming house workers; some are seeing a few friends or living as common law partners of former associates." He says nothing about those who have gone into new territory. But see what has been accomplished! These women formerly were confined in their brothels, rarely venturing out, doing their business surreptitiously and dealing only with those who came to seek them. Now they have been driven out into the open, to candy shops and soft drink and ice-cream parlors, where they come in direct contact with innumerable young boys and girls. Is it to be wondered at that increasing sexual laxity is the great problem of youth to-day? Are we advancing in the solution of this great problem of prostitution when we drive prostitutes from seclusion to promiscuous propinquity?

In my questionnaire I also asked where these women had gone to live after their districts had been "cleaned up". The Health Officer of a large city in western New York replied: "It (the red-light district) has been cleaned up with great detriment to the entire community. After each so-called cleaning up, these women have been distributed through the entire community and have invaded streets which have been considered good residential streets. They settle in districts in which they would never have thought of moving (previous to cleaning up) and in view of the fact that there is no particular mark by which we can identify these women, they cannot be kept out of respectable apartment houses and boarding houses. This is serious. Young girls and older women see these women living apparently in very much easier circumstances than they are able to do. They begin to wonder whether it is worth while to work hard and be respectable." Comment would be superfluous.

In the *Journal of Social Hygiene*, October, 1926, an innocent-looking item is quoted from *Health News*, August 23, 1926, published by the New York State Department of Health, to the effect that a study of new cases of syphilis and gonorrhea reported in this state outside of New York City reveals that boys at the age of 14 and girls at the age of 15, are being infected by venereal diseases with increased frequency. In 1925, 937 children and minors in their "teens" were infected with syphilis and 682 with gonorrhea. The *Journal* takes this occasion to point out the lesson that sex education, if it is to be effective, must not be delayed, and that parents and teachers be encouraged to discharge successfully their responsibility in the sex education of their children. The *Journal* utterly ignores the basic conditions which are at work in the precocious stimulation of the child's sexual knowledge and activities, not the least important of which are those which I have just mentioned.

The Society is to be congratulated on having heard Dr. Goodman's interesting remarks. They throw considerable light on the methods employed in the "American Plan".

OSCAR W. EHRHORN, Esq.:—I think it would be very interesting to hear what Dr. Chalmers has to say regarding this problem of venereal diseases in tropical countries as his experience as an army medical officer in the Philippines, Cuba and Porto Rico gave him a very wide view of the subject.

DR. THOMAS C. CHALMERS:—When I was the surgical officer of the old 12th New York stationed in the Philippines after the Spanish War our percentage of men incapacitated by venereal disease was only exceeded by those suffering from typhoid. Every army officer has to recognize that enlisted men are of the age where the sex question is present and has to be answered. He cannot shut them up and keep them away from women or more serious conditions, which are well known to medical men, among them masturbation, will develop. The tropics are absolutely loaded with venereal disease as I discovered during my four years' army service. In the old days before prohibition when pay-day came the men broke loose and it sometimes took a whole regiment to get them back again. Naturally, they were exposed to venereal disease. In the ten days or two weeks after pay-day the sick call ran up. There was only one way to get them back to duty and that was to put them in hospital under guard and treat them intensively. It is true that in civilian life we are getting fourteen and fifteen year old cases, but I do not see how sex instruction is going to stop it; these young people are acquainted with all there is to know about sex. They learn it in automobiles on the back roads. In your day and mine girls of fourteen and fifteen were protected by their brothers and their friends, but to-day they leave a dance to go for an automobile ride with young men carrying flasks, young men whom they have met at the home of a neighbor, and their brothers are conducting similar sex parties with other young men's sisters. The mothers of these girls have come to me for advice as to what to do to protect their children.

In 1901-2 at one army camp in the Philippines the problem was solved by an experiment which, while it lasted, reduced the percentage of venereal disease in the ranks from 68 per cent to 2 per cent. These men were badly needed by the engineers who

were building a very important bridge and it seemed expedient to keep as many of them in good condition as could be brought about. The women of the district round about were heavily infected and conditions were very discouraging, as was shown by the regular weekly venereal inspection. The cases when found were hospitalized and given intensive treatment and there were so many of them that the working forces were diminished all the time. A merchant in the town suggested that a number of women be brought from Japan who were clean since keeping the men clean and able to work was of such great importance. A number of Japanese women were imported and examined and found to be absolutely free from venereal disease. Japan regulates, to a large extent, the social evil and their regulations seem to be quite effective. A young woman in Japan who has no money earns her dot by becoming a prostitute; before she is married she is examined by government physicians and if found to be diseased is not allowed to do so. The percentage of venereal disease in Japan is not very large. These Japanese women were examined twice a week by the army medical officers and in two months the percentage of venereal disease among the soldiers was reduced to 5 per cent and in five months to 2 per cent.

It seems to me that this might be a solution under normal army conditions. Treat the prostitutes and clean them up. You can never be rid of them, you can not reform them, but you can keep them from being a menace. The more they are spread about, the wider disseminated will be the harm they distribute among young men. Regulations have to have the backing of authority, but proper regulation will reduce the percentages of venereal disease. A young man from the age of eighteen to twenty-five has a physiological desire for sex gratification and he is going to get it in the majority of cases. He and his progeny can be protected by cleaning up the source of infection so far as it can be done. In my hospital internship on Blackwell's Island I saw a great deal of venereal disease among prostitutes. We turned them out as nearly clean as possible. We knew when they went back they would again ply their trade for I believe once a prostitute always a prostitute, but at least for a time they were harmless as far as the spreading of disease was concerned. The solution of the social evil lies in prophylaxis.

RAY EVERETT, Esq.:—I realize that the Major was speaking of army conditions, but I believe that any system that maintains one sex for the gratification of another is not handling the problem of the social evil in a logical or ethical manner. If we could maintain under regulations women free from venereal disease as prostitutes, such a system would constantly require new recruits. In this connection I am reminded of the question asked by the Health Department of one of our large states: "Have you a daughter to spare?" In our present state of civilization we have risen far above the animal state where young men have to have their sex appetites gratified on all occasions. The foremost doctors in the country at the start of the world war put on record their opinion that continence is compatible with health. If syphilis in the tertiary stages is not usually worse than any of the usual effects of masturbation, then I have read the literature of medicine all wrong. May I say to Dr. Wolbarst that we also sent out a questionnaire and we received many answers. We asked of legal authorities the question whether or not there had been any increase in crime against innocent girls and women in those cities which had abolished their red light districts and most of the answers reported a decrease in these types of crime after the cleaning up of the red light districts. I agree with Dr. Chalmers that many prostitutes do not want to work, but that others can be kept from becoming prostitutes. But my closing query is "Why have prostitutes?"

DR. EDWARD W. PEET:—I was assigned, as a Major in the Medical Corps, by the government to San Juan and I saw the work that Dr. Goodman did and watched the progress he made, and I have therefore the right to bear testimony to the fact that although the work he did in the army cannot be done in civil life it was a great contribution to our knowledge of the island of Porto Rico and the problems we have to solve there. The Island reeked with all manner of diseases. Dr. Goodman's work called attention to the conditions existing on this Island and we owe him a debt of gratitude for the work he has done.

DR. GOODMAN (closing):—Regarding the remarks of Mr. Everett, I am only an amateur while he is a professional and knows whereof he speaks.

In answer to Dr. Wolbarst, I may say that there was no question as to the proper performance of the Wassermann test nor as to its interpretation. The manner in which these reactions were handled was interesting. Every sample of blood went to the laboratory under a number; we sent duplicates of a certain number and a known positive. We had enough positive cases for the control whose Wassermann should be four plus. Our contention was that negative Wassermanns were more difficult to procure. We were aware of the fact that other diseases

than syphilis give a four plus Wassermann and these were eliminated by every clinical and laboratory means. Our active syphilis amounted to 12 per cent among the women so we had active sources of infection among the men. One question which should have been asked is what the proportion of men who co-habite with these women develop venereal disease and among them how many were carrying the disease latent so they could not acquire it. As to chemical prophylaxis: the rate of infection was the same. As to the dispersing of the prostitutes from the Red Light District and discovering them sojourning in respectable parts of the city, the answer to that is that the Red Light District never contains all the prostitutes. As to the attitude of compassion for prostitutes as unfortunate women, anyone who has come in contact with them in an effort to prevent their spreading disease would realize they are not ever cooperative.

The Rural Hospital Movement

Farmington, Maine, a town of 3200 inhabitants in the Rangeley Lake region, will receive approximately \$140,000 from the Commonwealth Fund toward the construction of a modern hospital, according to an announcement recently made at the headquarters of the Fund, 1 East 57th Street. This is the third of a series of rural hospitals planned under a cooperative program which contemplates the building of two such institutions annually in selected communities throughout the United States with the object of improving health and the conditions of medical practice in country districts. As with the other communities accepting the terms of these grants Farmington will contribute a third of the cost and will assume the operating expenses, while the Commonwealth Fund will donate the remainder of the capital cost and will provide plans and specifications for a fifty-bed hospital meeting the highest modern standards of construction and equipment.

Fourteen communities in eight states made formal application for the third institution offered under the Fund's rural hospital program, and Farmington was chosen after thorough study of the local needs and resources of these towns. One of these places will probably receive the second of this year's hospital awards, to be announced in the near future. Two southern communities, Farmville, Virginia, and Glasgow, Kentucky, were picked for the hospitals to be built under last year's appropriation, and accordingly northern and mid-western states were given preference in the selection of the third site.

Like the two hospitals already under construction, the Farmington institution will serve a wide range of surrounding territory. The village lies in a valley extending for about seventy miles southward from the Canadian border and including Franklin County and parts of other counties in west central Maine. This region is shut off to the east and west by ranges of hills making it difficult to transport patients over considerable distances to cities which have adequate hospital facilities.

Another factor which makes this section of rural New England representative of the type of community that the Fund wishes to aid through its hospital program is that active public health work is already being carried on under the auspices of the state and local boards of health and of the Maine Public Health Association, one of whose public health nurses has her headquarters at Farmington. The enthusiastic endorsement of the hospital project by local physicians and surgeons, twenty of whom signed the application, gives promise for the development of a competent professional staff. Under these conditions a fifty-bed hospital serving the population of 30,000 in Farmington and the adjacent area in the ratio of one bed for every six hundred inhabitants will, it is thought, further demonstrate the value of such institutions in improving public health, medical, and nursing services in country districts.

According to the last annual report of the Commonwealth Fund, the Board of Directors in approving the project for building rural hospitals had in mind "the obvious and widespread lack of accessible hospital facilities of general character in rural districts, and the accumulating evidence of the disadvantage of rural communities as compared with urban in the matter of health, as shown in many instances both by their higher morbidity and mortality rates, and the higher proportion of defects among rural school children. These hospitals, strategically located in various sections of the country, it is believed, will in time influence neighboring communities to establish similar facilities out of their own resources, and will help to break down the tradition that the hospital is purely a rehabilitative institution."

Scarlet Fever Decrease

During October, November, and December, 1927, the number of cases of scarlet fever reported to the Public Health Service was almost the same as the number reported for the same period of the year 1925, but the figures are somewhat smaller than they were for these months in 1926.

What the Mind Does to the Body*

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We hear a great deal about the influence of the mind on the body in our day and we are told that physicians do not pay enough attention to the power that the mind has and therefore do not secure results that might readily be secured without the nauseous remedies or the severer forms of treatment or sometimes the surgery which they deem necessary for certain forms of disease. There are some people who think that the mind can produce simply wonderful cures on the body and they feel that physicians have neither properly investigated nor above all kept a sufficiently open mind to enable them to appreciate how much this means in medicine.

Now there is no doubt at all that the mind does produce wonderful cures. Go to a Christian Science demonstration meeting of a Wednesday night, and listen to all the people who proclaim themselves cured. You will hear of people who went to many physicians, tried remedies in vain, were told that they were doomed to death or to chronic disease for life and lo! they are entirely well. What is the mechanism of their cure? Well, Christian Science proclaims that there is no such thing as disease, that it is an error of mortal mind. Their doctrines go even farther than that. They declare that there is no such thing as matter. Matter doesn't exist outside of the mind. Whatever exists, exists because we think it exists. This is pure idealism. Bishop Berkeley, a good Irishman, at least he was born in Ireland though he was an Anglican bishop, taught this same doctrine though very few people accepted it. Bishop Berkeley once visited this country and was in Rhode Island for a time. While he was there attending some sort of function in a garden given in his honor, a gentleman cow made his way into the enclosure and everybody present found it advisable to seek the shelter of the house. It was noticed that the good bishop was one of the first in. He had been demonstrating to interested listeners that he did not exist except in his own mind but he was very anxious to preserve that mental existence of his from the horns of an angry bull. Someone proved in Athens long ago by the familiar method of differentials, that it is impossible to walk. There is a more or less mechanical proof for that sort of thing. But the answer of Socrates was, *solvitur ambulando*, the problem is solved by just walking.

Oliver Wendell Holmes reminded us that while Bishop Berkeley believed that everything was nothing and that he and everyone else existed in his own mind, he recommended tar water for every disease under the sun, had it made by the barrel, though it represents only the odor of tar on the water, and claimed to get wonderful results from its use. As Oliver Wendell Holmes said, everything was nothing but tar water cured everything. Bishop Berkeley seems to have thought however that diseases had an existence apart from the mind for otherwise why would he have used tar water?

What the Christian Scientists practically say is that disease is an error of mortal mind matter has no existence except in the mind, so of course how can you have anything the matter with you since there is no matter

in which to have anything the matter with you and that ends the whole matter. Now I know that such expressions may seem far-fetched and represent an attempt at cheap witticism but I have the greatest possible respect for Christian Science because I know that it "cures" people. I know that it does not cure real disease, but these Christian Scientists say there ain't no such thing. I have known patients who have been round to half a dozen physicians and almost as many surgeons and everyone of them had promised to do them good, and did them no good except in the slang sense of the word and then they were "cured" by Christian Science. Remember I said that they were "cured" by Christian Science, and I mean that. Doctors had been unable to cure them and Christian Science "cured" them.

There are a lot of other so-called healing religions that cure people. During the summer on the nice cool evenings that we had I dropped in to hear three or four Buddhists lecture at prominent hotels or still more prominent churches whose pastors and congregations were on vacation. They too promised to cure people by belief in Buddha and by practicing going into the silence and by learning to tap the great reservoir of power that exists all around us, so they say, but that most of us are unable to reach. There seemed to be no doubt that some of the people present were receiving great benefits because I saw some bills in the collection basket and some of those present were evidently on terms of closest intimacy with the good swamis and the good swamis were far from home and you can't live on nothing in New York, so that it was evident that they were making a living and the easiest way to make that is to bring "cures" to people. Manifestly some of our good American Buddhists owe their interest in oriental occultism to the fact that they are securing very material improvement for health from the esoteric doctrines of the powers of Guatemala.

Not long ago I attended a session or what will you call it, a congregational meeting, of the Religion of the Solar Plexus. We were told that there was no need of worshipping a God outside of us, we have a god within us. That was emphasized for us by quoting Latin in support of it, *et Deus in nobis*, if we would only learn to worship that god within us properly, we could be assured of health and also of wealth. The meeting was held in a prominent hotel, the guide, philosopher and friend who wanted to induct us into the Religion of the Solar Plexus lived there too, and so far as I know they do not live on air in that hotel, so here once more was a case of cures. It is when people get cured that they cough up. What the nature of the cure may be is another thing but manifestly they get cured. They had been going around complaining a great deal or suffering, as might be said from many complaints and now they are through because they have been cured.

Our guide, philosopher and friend of the religion of the Solar Plexus warned us not to allow ourselves to be influenced by any religion that required the intermediation of anybody between God and ourselves. Above all we must be careful not to give money to people who claim to have religious privileges and religious

* Presented before the Society of Medical Jurisprudence at the New York Academy of Medicine, October 10, 1927.

powers,—of course he did his own work for a consideration—but the great power was within us. I was told that he held a clinic every week and that a great many people attributed their cures to his guidance and direction and intercession.

Now all these are mental cures, that is they are cures worked through the mind because there is absolutely no physical force employed, there is nothing physical about the matter at all and yet people get cured. Just in the same way thirty-five years ago a great many people got cured by hypnotism. Now we know that hypnotism is induced hysteria. Quite in the same way not long ago a number of people in New York got cured by means of a radio apparatus. Investigation by the police department showed that the wires were wrongly connected and that you couldn't have heard a clap of thunder a mile away over it and yet the vibrations that went through it or were said to go through it cured a number of people. Coué came to us not long ago and said quite frankly that he did not cure anyone but he taught them how to "cure" themselves and his method was a very simple one: say to yourself every morning when you wake "Every day in every way I am getting better and better." That seems too absurdly simple to cure anybody but a lot of people got cured. It is said that over twenty thousand people used to go to Coué every year at Nancy, about one-third of them Americans who had made the long trip across the ocean. Some two-thirds of them were cured and one-half of the remainder were benefited leaving only about one-fifth of all those who went without any improvement. Some one was unkind enough to say that those were the only ones who had anything really the matter with them, but of that I have nothing to say at the present moment at least.

No wonder that people say, isn't it a wonderful thing the way the mind cures the body? Is it any wonder that people are beginning to say that the doctors must learn something more about this marvelous power that the mind has over the body. Some are even beginning to think that life and mind must somehow be synonymous and that mind influence under certain circumstances can represent life influence and as the life has made the body and the process of growth, why shouldn't it renew the body when portions of it play out or are seriously affected? And then, isn't it something like that that we are witnessing in the matter of these cures all around us. The cures are evidently not due to anything physical and yet often they cure what seem to be really physical ills, for what hypnotism cured particularly was many of the painful conditions of the body such as lumbago and sciatica and lame backs of various kinds. A great many of the Christian Science cures seem to have something physical in them because people who could walk only with great pain now walk freely and without pain and a great many of them have gained in weight and have had other strikingly physical things happen. The useless radio apparatus cured people who had lame backs and shoulders and lame arms and pains here and there that made life miserable for them, but that is what chiropractic cures and osteopathy and chiropractic is the illegitimate son,—not to use the uglier word,—of osteopathy and the founder of osteopathy believed his mode of healing disease had been revealed to him from on High. Read this autobiography and see. He used to say to his diplomats,—his curious word for the people on whom he conferred diplomas,—“don't forget that there is one faith, one God, one baptism and one mode of healing all disease—osteopathy.” Osteopathy has spread so that a great many people have been

cured and some of them have been lawyers and judges and not a few of them have been clergymen and there is no use trying to tell a man who has been cured that there is nothing in osteopathy because he knows better.

The suggestion of Dr. Still, the founder of osteopathy, that ninety-five per cent of all diseases including all the microbic diseases are due to pressure on nerves produced by subluxations of the spinal vertebrae, is nonsense, but that doesn't make any difference to the man who gets cured. Of course if Dr. Still was right, Pasteur and Lister and Virchow and Laennec and all the other great men to whom the nations have erected monuments, were wrong. Neither does that make any difference to the man who gets cured. He knows that he was ill and now he is well and whatever happened in between cured him. Dr. Still actually proclaimed the great physicians and surgeons of the world to be either fools or knaves while he was the only wise man that ever lived and he was just an ignorant son of an exhorter down in Kansas brought up near an Indian graveyard, learning something about bones as the result and concluding that since all he knew was bones, that must be all there was to know in the world. He boasted of being able to put a skeleton together in the dark, but any medical student at the end of his first year who couldn't do that after two hours of special preparation would be a fool and had no business in medicine. But then if Dr. Still cured them that is all there is about it.

Of course the question is how were these cures effected? It isn't enough merely to say that it was not the manipulations that did it but we must find out what it was that did it. Osteopathic healers are just in the same class with Christian Science healers and hypnotic cures and magnetic cures and mesmeric cures all of which we now recognize were not made by any physical agent but by the influence produced on the minds of the patient. A lively expectancy of getting cured was produced in them and then they proceeded to get better. Their minds influenced their bodies favorably and then they got well.

Here is where the expression comes in so often, isn't it wonderful the way the mind cures the body, and my reply to that always is, no, that isn't what is wonderful at all, that is putting the cart before the horse. What is wonderful is the way the mind can produce symptoms in the body, for the mind can actually produce the symptoms of almost any disease. It cannot produce the disease but it may give rise to the symptoms of it. Years ago in Philadelphia where there used to be some typhoid fever present nearly always, when the medical students began the study of typhoid fever it was rather expected by the professor that before long some of the students would be around to see him confident that they had the disease. They did not have it but in their dread of it they had been producing some of the symptoms or translating certain feelings into the symptoms of the disease. Many city doctors have the experience that after some new-fangled disease is described in the newspapers, some of their patients will be round in order to be assured that they have not the disease in question because they have some of the symptoms. Some of them will be in a panic because they are sure that they must have the affection. Whenever there is much talk about cancer, certain susceptible and suggestible patients will be around to assure themselves once more that certain feelings which they have and that are scarcely more than normal physiological sensations are not symptoms of cancer. They have been worrying so much about them and paying so much attention to them that they

have exaggerated them in a way that makes them feel that they are symptoms.

A very striking example of what the mind can produce in the body is to be seen in what the gynecologists and obstetricians call pseudosydes, that is false pregnancy. A certain number of women who have married late in life and are very anxious to have an heir, especially in history certain queens who wanted to carry on the dynasty, have gotten up all the symptoms of pregnancy in such a way as to deceive almost the elect. Poor Queen Mary Tudor of England labored under that delusion for months. Occasionally young women who have been indiscreet and are anxious lest pregnancy should occur produce the same effects on themselves and as is well known may cause cessation of their menstruation and even other apparent symptoms of pregnancy. If the mind can produce effects of this kind, it is easy to understand that it may produce rather serious pathological disturbances in other sets of organs.

Take the digestive tract for instance. It is surprising how largely it is under the influence of the mind. Perhaps the story that illustrates that best is the classical instance from Professor Max Muller's book on language. He is discussing the question as to whether language might not have been invented by the production of imitative sounds and he tells the following story: an Englishman in China years ago was not at all certain that he would be able to get anything to eat that he cared for on his journey into the interior. He had found certain meals offered to him rather suspicious and he had become very hungry and one day he was offered a nice meat stew that seemed to him to be duck. He was very hungry and ate heartily of it, calling for a second helping and was on the point of calling for a third when he thought that he would assure himself as to what it was, mainly with the idea of being able to secure it at another stopping place. He pointed to the dish and knowing no Chinese and the waiter knowing no English, he used the words that he thought would get his message across. He pointed to the meat and said questioningly, "quack quack, quack quack?" and the Chinaman shook his head and said "bow wow, bow wow." It was not duck but young puppy dog he had been eating. A few minutes before that he had enjoyed the meal thoroughly and now he did not care about it. A feeling of nausea crept over him and it was hard to keep it down, and yet during the siege of Paris in 1870 they not only ate all the dogs in the city but also the rats and mice, and they finished up by eating all the animals in the zoo.

IDEAS MIXED WITH FOOD

I once had a man describe for me what happened after he went to a well known gourmets' dinner in Paris. It was the annual dinner and they were expected to serve something that had never been eaten by civilized man before. Almost needless to say that makes an interesting occasion. The visitor did not recognize the foreign dish when it came, a French cook having properly disguised it. The rule at the club is never to talk about the eats and the prohibition extends to the smoking time afterwards. Towards the end of the evening however when the prohibition was relaxed, the visitor turned to the friend who had invited him and said, "Now what was it that we ate that was unusual?" and his friend said, "Grilled angleworms." The visitor said, "Why I thought that dish was vermicelli with a rather strong meat sauce. Of course it was a little gritty, I remember." And then though those worms had surely been killed during the cleansing process given them and then

further devitalized if possible by sauce and still further by the cooking, they began to come alive and wanted to get out. That dinner did not digest well after that at all.

I have known a man to ask earnestly just what his steak had been fried in, that is what sort of a fat had been used, and though he liked the steak and had obtained a second helping of it in spite of the unusual taste he could not place in the frying material, he was not able to retain his meal when he was told quite frankly that it had been fried in the rendered fat of a dog, dog-oil as they called it. Of course the dog is ever so much cleaner than the hog and though you may say the dog is a carnivorous animal and we do not eat this type, it must not be forgotten that the hog is also carnivorous whenever it is fed on town slops and that there are those who say that slop-fed hogs represent excellent meat, the best of the hog variety.

If you get ideas mixed with your food, there is going to be trouble. Lots of people will lose a meal that they have taken with relish if they learn something about it that seems to them over disgusting. I have known them sometimes to lose a meal even when what they heard about their food was not true, showing that it was entirely a matter of the mind and not physical. I have seen people lose their appetite for food when they were ravenously hungry because they learned something with regard to it which disgusted them. I once saw men sit down to steak and fried potatoes and peas on a bitter cold night when dinner was delayed two hours because a train was late, and just as they were all ready to eat the meat distributed on their plates and the server about to distribute the gravy, from a leaf of lettuce that had garnished the steak there rolled an earth worm into the hot gravy, wiggled a few times and died. No one would touch the steak though the garden worm had really not been near it, at least had not touched it and the garden worm is reasonably harmless anyhow.

A great many people get ideas with regard to their food and then they cannot take that particular kind of food or they will have trouble, that is they will feel uncomfortable and will be quite sure that it is the food that is disturbing them when it is really their idea with regard to the food. I do not know how many people I have seen who were quite sure that they could not take milk. Now of course there are a few people who have a definite idiosyncrasy against milk. I have often suggested however that every human being now alive lived exclusively on milk for six months and doubled in weight during that time. For the vast majority of us then there can be no question but that milk must be a good food, and yet the number of people who proclaim that milk makes them bilious is still large. For most of them it is the milk idea rather than the milk itself that is to blame and milk is such a precious food. I know that a number of young folks who develop tuberculosis are among these patients who are quite sure that milk disagrees with them. Had they taken more milk their resistive vitality against the tubercle bacillus would have been higher. They learned however that they could take milk and even enjoy it only after they went to the sanatorium and then they wondered why they had not taken it before.

Ask any doctor who has had years of experience aboard an ocean steamer and he will surely tell you how much of seasickness he thinks is due to the fact that people make up their minds that they are going to be seasick and that they will not be able to retain their food and then of course they do not. The causative

agent of seasickness is very probably disturbance of the semi-circular canals, the organ of equilibrium, and the effect of the mental suggestion may be exerted directly on these organs which are rather sensitive and which are not a little under the influence of the mind. All of us have a dread of heights and our equilibrium becomes unstable if we attempt to look down from a great height. All the men who work on high buildings have at some time had as a rule this dread of heights but they have learned to overcome it by practice and control their failure of equilibrium. Undoubtedly something of this same thing is true with regard to other manifestations produced by the organ of equilibrium. Of course many people are much more sensitive than others but there are women particularly who from the moment they get aboard a steamer even though the sea may be as quiet as an inland lake for days feel that they must not get up and at once have an upset stomach in case they do. It is a very similar case to that of eating something that you did not know the content of exactly and later learned something disturbing about. What you learned may be entirely a mistake but if it affects the mind unfavorably it is very probable that the stomach will be upset.

The all important subject for study in the modern time then is not how does the mind cure the body, but how does the mind produce symptoms in the body. The mind can produce the symptoms, as I have said, of any disease though not the disease itself. It is only when the mind produces the symptoms that the mind can cure them. When we hear of a wonderful cure that has been effected by some remedy or mode of treatment or some belief that is surely utterly inadequate to produce such an effect, it seems very hard to explain what has happened until we realize that it is just a question of people being cured of symptoms that they produced in themselves. When magnets cure pains and aches and lameness or when toy electric batteries cure stomach ache or when electric medals and electric belts that haven't an ion of electricity in them anywhere give people new strength and they want to tell you all about it, you know that what they have really given is a new idea or a change in the attitude of mind.

A lot of people are cured by Christian Science and by osteopathy and by chiropractic and by ever so many curious healers and by iri-diagnosis and Abrams' magic box, and so on, and they like to proclaim their cure and they seem to think that they and their ills were raised up in a sort of providential way to demonstrate the wonderful efficiency of the new remedy, but it is only a case of their producing symptoms that now have stopped because their minds are occupied with the idea of cure rather than the idea of disease. Coué knew the basic principle very well. He told me when he came over here, as of course he proclaimed publicly, "I never cure anyone but I teach them how to cure themselves," but it is said that over 20,000 people went to Coué every year and a great many of them were made ever so much better than they had been. All he did was have them say to themselves, "Every day in every way I am getting better and better." That is all the quacks and charlatans do, encourage people to think that they are going to get better and then they proceed to get better. It looks too simple to be true but truth is always simpler than we expect it to be and nature always works with much less complexity than the closest philosopher unused to nature's ways might lead you to think.

IDIOSYNCRASIES AND INDIGESTIVE IDEAS

There are very definite idiosyncrasies for food materials. As is well known some people cannot eat straw-

berries without having a skin reaction and sometimes also a reaction in the intestinal tract. A certain number of people cannot take cheese without a very definite reaction. Then there are the allergies which have been discovered in recent years and various substances that either in the respiratory tract or in the gastro-intestinal tract cause skin reactions of various kinds. Such idiosyncrasies however are very rare compared with the number of people who are quite ready to believe that they cannot take certain foods because they disagree with them. They are sure that they cannot digest them. There are any number of people who will not take tomatoes because they are acid. Well, I distinctly remember that my old grandmother would not take them because she was sure than they produced cancer. There is just as much reason for the one opinion as the other.

There are a large number of people who are quite sure that they cannot take raw foods. The reason advanced is that raw foods are much harder to digest than cooked foods. The cooking is supposed somehow to make the food materials ever so much more digestible. The most important discovery with regard to eating in recent years is that a great many of the vegetables digest much more readily when raw than when cooked. Raw cabbage, for instance, digests better than cooked cabbage and especially is this true with the heart of the cabbage, what the country boy calls the cabbage stump, which has a fine nutty flavor. Raw turnips digest better than cooked turnips and raw carrots digest better than cooked carrots. It has now become quite the thing to serve quartered young raw carrots in the same dish with celery and a good many people have discovered that they like it and that it is not only palatable but very digestible and wholesome.

Perhaps the greatest surprise of all was to find that raw potatoes digest as well as cooked potatoes. If you will recall how carefully our mothers used to remove any portion of the potato that was a little bit hard, afraid lest it should not be cooked enough, you will appreciate what a change has come over the attitude toward potatoes in the raw state. Any number of patients have come to physicians and assured them that they had an attack of acute indigestion which they were certain must come from the fact that they had eaten potatoes the day before which were not very well cooked. Children who eat raw potatoes, getting used to them when they are young, would much rather have them raw than cooked and they have been known to beg, borrow or steal pennies so that they might go out and buy raw potatoes just as other children buy raw apples in order to enjoy them properly.

The symptoms that were supposed to follow the eating of raw vegetables in the years ago were all due to the fact that the mind influenced the stomach unfavorably. It was a very striking demonstration of what the mind can do to the body under certain circumstances. For a time shortly after the discovery of microbes when people attributed the value of cooking to the fact that all microbes were killed by it, there were very few raw things eaten. Since the discovery of vitamins we have gone back once more to the eating of raw vegetables and it is very probable that not a little of the nervous instability and the tendency to nervous exhaustion or lack of pep of which some people who were very solicitous about themselves and very careful not to eat raw things complained, was actually due to the fact that they were not getting enough vitamins in their diet because of their avoidance of raw food materials. This would not be the first time in history that people were

unconsciously producing in their solicitude about themselves the symptoms of which they were complaining.

MUSCLE TROUBLES AND THE MIND

What is true with regard to the digestive functions and interference with them by mental states, is also true with regard to muscle troubles of various kinds. If for any reason we keep certain muscles at rest or at least keep them from being used freely, changes take place in them that make it extremely difficult for us to use them properly. After muscles atrophy there is only one way to get them back into use again and that is to go through a period of achy soreness while they are being used. The football man who trains for the squad knows what achy soreness comes over him in the process of getting his muscles into condition. He does not call his trouble rheumatism however nor even pains and aches. He just has sore, tired muscles. He knows that he must go through that and he does so. Older people refuse to accept that idea. Hence if for any reason they have kept muscles at rest, they find it very hard to get them back into proper use again. That is why it is a dangerous thing to put a plaster cast on the ankle or knee of a person beyond forty because the muscles around will inevitably atrophy and then it will prove very difficult for the patient to get them back into action again. It will require a very strong influence on his mind to get him to go through the sore, tender period which he will be likely to think of as pains and aches which he must submit to if he is to get back his muscular power. There are any number of cases like this that find their way to quacks and charlatans of various kinds and are cured because the irregular practitioner pays individual attention to them and gets them to accept the pains and aches that they suffer as a portion of their treatment. Osteopathy owes its success more to this than to anything else. The chronic pains and aches of older people, accompanied often by lameness, lame backs, lame shoulders, lame legs, have been cured by magnets and electric batteries and Leyden jars and electric belts and rubber kidney plasters and a host of other things that are perfectly useless so far as any physical effect is concerned but that give the people the courage to push through and get their muscles into shape again.

Discussion

DR. LAZARUS W. ZWISOHN.—Dr. Walsh speaks of the mind as if it were an entity, independent of the body.

The term mind expresses the function of the brain. When we say, I changed my mind, the thinking brain changes its thought and the function of the brain sends out impulses, that the body shall change its actions. This changed action, the body performed by direct action of the brain, not by the function so called mind.

The term "*mind*," acting on the body is a misnomer.

The Christian Science healer claims that matter does not exist, that a broken leg does not exist, it is merely the imagination of the mind. In other words, that minds are entities, existing without bodies, for matter does not exist; and when one has a pain, it is the error of the body-less mind.

It therefore behooves the scientific medical man to discard the term, "*mind acting on the body*."

When the body is influenced by certain functions of the brain, like fear, etc., it is called functional diseases, because there are no changes in the tissues of the body, and as soon as the fear or the imagination passes off, the functional disease is cured.

I would like to hear Dr. Walsh's definition of "*mind*."

DR. S. A. KNOFF.—I will not venture to discuss Dr. Walsh's address, chiefly because to argue with him is a risky thing to do, but I would like to ask a question. How does the Doctor explain the following situation: An individual is declared insane; sometimes there seems to be only a functional derangement, and sometimes the condition is apparently due to an organic lesion: yet by repeated use of hypnosis the case gets well.

DR. BLUM.—Dr. Walsh's lecture this evening has strengthened the high opinion of him I have always had and I am very

glad to have been here to hear it. I too would like to ask a question. The trend of present-day psychology is to disregard the use of the word "*mind*," and substitute "*behavior*." How does Dr. Walsh regard this?

DR. SCHWARTZ.—I have a case which is an interesting illustration of the apparent effect of the mind on the body. The patient is a young woman of 35 with a severe case of skin disease which does not yield to any form of treatment and her mental condition is such that she constantly speaks of suicide. I have no doubt that she will try to kill herself if her skin condition does not improve. It developed during several conversations that she has a fear of becoming a morphine addict, having been warned of this when in a hospital. She suffers from insomnia to such an extent that she has not had a full night's sleep in months and has been taking luminal, sedatol, and other sedatives, but has constantly refused to take morphine. What I would like to ask, is this desperate state of mind due to the fact that she is afraid of becoming an habitue of morphine.

DR. FRANCIS.—I had an interesting case, illustrative of the influence of mind on the body, some time ago. The patient had been clinically diagnosed as a case of carcinoma of the esophagus and was sent to be fluoroscoped. He had been unable to swallow even liquids and was in a very weakened condition. The fluoroscopic examination was a new experience for the man and he must have received a profound impression from the darkness of the room and the weird effect of the corona from the overhead wires. At any rate, when he was suddenly handed a glass of barium and ordered to swallow it he did so without hesitation; this was noted and another glass was handed to him and then another, both of which he also obediently swallowed. He was then confronted with the fluoroscopic view of his stomach and told his carcinoma had gone on down and he was so impressed with his sudden cure that he went out to a restaurant and ordered a beefsteak and thereafter had no trouble in swallowing.

DR. KLINE.—I have enjoyed Dr. Walsh's address very much and would like to speak of another phase of this subject of the influence of the mind on the body. Those of us who have examined many gastrointestinal cases know the difficulty attending the diagnosis of so-called organic symptoms. The importance of correct diagnosis cannot be too much emphasized in ruling out a mental element. It is seldom that out of ten cases we will find more than two with organic lesions. It is of course important that these be recognized so that proper treatment can be instituted. But the others are actually suffering and it is also important to discover how to get the mind to cure these symptoms. There is always doubt and one hates to tell the patient he is hysterical when one may have overlooked a real underlying pathological condition. Our knowledge of the gastrointestinal tract still lacks something to be desired and until we know more about it we must be wary of too sharp demarcation between which case is organic and which is functional. Then so many of these cases will not go to quacks.

DR. WILLIAM STEINACH.—Dr. Walsh has given us, in factitious vein, a very interesting and entertaining discourse on the effect of the mind on the body, and in most cases where the ideas can be corrected. However, there are many patients who cannot correct their ideas and must be segregated for the good of the community. A few days ago, I saw an estimable old gentleman, of good education, who was obsessed with the idea that he was being pursued by the gloved black hand, and had been writing the Commissioner of Police about his fancied annoyances. While this was purely a fiction of his mind, it influenced his conduct and was a danger to the community. Unfortunately, not like the cases that Dr. Walsh related, he could not be persuaded to give up the idea. Such patients, who are dominated by ideas which influence their whole lives and conduct, fill our insane hospitals, and I would like to ask Dr. Walsh what he would suggest in such cases.

DR. RABINOWITZ.—I have had a number of cases in which apparently organic symptoms have been proved to have been mentally caused. I remember a man who was referred to me as a case of cancer of the stomach and he firmly believed he was suffering from this disease. I had my doubts, but I said to him, "How do you know you have cancer of the stomach?" He replied that he could feel the claws pinching him. Evidently he associated the word cancer with crab. When I explained to him the nature of cancer he got better and completely recovered in a few weeks. Another case was an hysterical woman who complained of disease in the pelvic region. She was taken to the hospital and told she would be operated on and was actually given an anesthetic. Believing the cause of her trouble had been removed she suffered no more symptoms until a few years later in a quarrel with a friend she was informed that she was crazy and had never been operated on,

whereupon all her symptoms returned and she suffered from them thereafter.

VICTOR HOUSE, Esq.:—I would like to ask Dr. Walsh if it is true, as the discussion tonight would seem to indicate, that many cases of mental deviation from the normal are being treated as organic disease, and if a recognition of the distinction should not be taught in the curriculum of the medical schools.

JOSEPH BEIHILF, Esq.:—I would like to ask Dr. Walsh whether functional or organic disturbances have been superinduced by the disordered mind itself, and whether there is a known percentage of fatalities in those cases that have been diagnosed as purely mental or imaginary ones.

DR. WALSH (in closing the discussion):—In answer to Dr. Zwisohn, I have no definition for the word mind that satisfies me. I am not surprised at that because a great many of the basic words do not admit of definition. There is no definition for life and when somebody asked Dr. Milliken what he meant by the word spirit his reply was, "If you will define matter, I will define spirit." Dr. Milliken is the greatest living authority on matter and he knows how little we know about it. I know what mind is and I think that my auditors know what it is because most of us have some of it, but don't ask us to define it. An Irish friend of mine suggests that the best definition of mind and matter that he knows of is to define them in terms of each other and put a not in the definitions. What is mind? No matter. What is matter? Never mind. I do not care for the definition that makes it a function of the brain. I have no sympathy with the formula that suggests that just as the kidney secretes urine, so the brain secretes thought. Thought is something much more than any product of matter. By that of course I mean original thought. Where thought comes from I do not know and all I know is that it comes and it can affect human tissues and I have been trying to tell you how it may do so.

In answer to Dr. Knopf. I am perfectly free to confess that I do not know quite how hypnotism could cure insanity. Under certain circumstances the insane individual reaches a point where any sort of push may start him on the road to sanity again. Hypnotism carries suggestion with it or is itself induced suggestibility and therefore might be used to decided advantage for the suggestible insane. In insanity the individual is much more important than his disease, as is true in all disease, and certain modes of suggestion may be very valuable. I think that the cures said to be due to the removal of the teeth and the tonsils and other real or supposed foci infection, are often merely the results of favorable suggestion at a happy moment.

In answer to Dr. Klein. Diagnosis in gastro-intestinal conditions is extremely important. Long ago Hippocrates said, time is short and art is long and judgment difficult, and our word diagnosis is really only Greek for judgment, that is it means knowing through and through. I think that the maxim of the gastro-enterologists that you either have cancer or ulcer of the stomach or you have nothing in the stomach is very valuable. To exclude these is not very difficult. If after that you get rid of your patients' dreads and get them to eat reasonably well, they will get on. It is surprising to see how much dieting patients can do in the sense of getting valuable material out of their dietary. Get them to eating again and they get better.

In answer to Dr. Steinach. I am quite persuaded that there are a number of mental cases that can be influenced through their minds. We have no definition for insanity and it includes all sorts of conditions and some of them are quite amenable to suggestion as I have already said in mentioning hypnotism.

In reply to Mr. Beihilf. As regards the number of patients suffering from the psychoneuroses, the French tradition apparently founded on careful observation is that about one-half of all the patients who walk into a doctor's office, what the French call his ambulatory practice, are suffering from symptoms which will only be relieved if the physician can produce a change in the attitude of mind of the patient. These are the cases that are cured by all sorts of quacks and charlatans who do not do anything for them but produce a strong mental impression. The mental impression does the curing, and then they announce that they have been cured by this new-fangled method no matter what it may be though all that has happened is that they have cured themselves. Coué simplified that whole matter by saying, "I do not cure people but I show them how to cure themselves."

Tubal Patency

The results of clinical study in 650 cases of sterility examined by the method of peruterine insufflation combined with the kymograph are presented by I. C. Rubin, New York (*Journal A. M. A.*, Jan. 14, 1928). In 4 per cent of the cases there was well marked spasm and hypertonicity, and in 5.5 per cent of the cases there was high grade stricture; 38.5 per cent of the cases proved to be totally nonpatent.

Criminal Psychology

(Concluded from page 149)

the father to protect the family name made good. He was arrested and brought back but the charges were dropped. In three months his father made good some \$35,000 but to do so he had to mortgage his house. I told him I thought he had done enough and that he should be protected for the future. The boy was again under arrest for some minor crime and I decided that boy was an incurable criminal and that his mental condition was such that he should be sent to Bloomingdale which was done. He was given every chance there in the hope that he might be cured but it was decided that his condition was mental and that he should be incarcerated and to-day he is in Matteawan and there he will stay if I have anything to say about it. At least his family is not disgraced. If he ever comes out he will be just as much of a thief as he ever was. Keeping him there will at least protect his family and society at large.

DR. WILLIAM STEINACH: The problem of dealing with crime is as old as the Mosaic law, an eye for an eye, and a tooth for a tooth. Later the opposite sentiment prevailed of turning the other cheek when one was smitten. Neither has stopped crime.

In recent years we have learned a lot about crime and criminals, and one of these is the discovery that many criminals are defectives and moral imbeciles. Under our recent efforts the defectives are sent to Naponach and the habitual criminal under the Baumes' law is segregated for life. There are some who enter crime as a profession and a livelihood and are very clever rarely being caught. However, as Judge Ommen said, there are criminals who in spite of the best of home surroundings and environment, return to a life of crime.

As an answer, to those reformers who say that severity of punishment is no deterrent to crime, George Washburn Child, in a recent article on the subject in the "Saturday Evening Post," states that in looking up the records he finds that when the judges give good stiff sentences, there is a decided falling off in the number of hold ups in a community.

When the defectives, numbering perhaps 40-50% of the criminals, are sent to appropriate institutions, and the habitual criminal segregated, the problem will at least have been partially solved.

MR. WITTE: This discussion has been very interesting. I want to answer the gentleman who stated that he was an ex-convict and had served terms in various prisons and who coupled his statement with the question to me—did I believe in severe punishment and long prison terms; also did I know that most convicts upon their discharge from prison vow vengeance against society—The answer is, and I believe he will admit so for himself and other fellow-convicts, that as a rule the convict upon leaving prison feels that he has been more sinned against than having sinned against others.

Answering the lady who expressed her views and which she believed would best tend to reform the convict, which summed up meant to practically coddle them—I think I can best reply by telling you a story—Some years ago I attended a performance of Weber and Fields. In the act being produced they were supposed to be travelling in Europe. Fields had accumulated a large sum of money in his business and was now wealthy. Weber asked him what he was now going to do with all his money—Fields replied "I am going to build a jail." "Build a jail?" questioned Weber. "Yes," answered Fields, "the people in the jails we have now are not contented and satisfied, so I will build a jail where everyone will be contented and satisfied and it will always be full." If prisons are to be conducted so as to cater to the criminal class you will always have them full.

Pathologic Changes in Fauical Tonsils

Among the 1,000 excised faucial tonsils examined by Albert S. Welch, Kansas City, Mo. (*Journal A. M. A.*, Dec. 24, 1927), there were found two tuberculous lesions (0.2 per cent), and one malignant (0.1 per cent) and one nonmalignant papillomatous lesion (0.1 per cent). There was no evidence of actinomycosis, syphilis or angiomata. Of the tonsils examined, 43 per cent did not reveal any evidence of gross change whatever, and 28 per cent were not altered except for cheesy cryptic concretions (so-called chronic cryptic catarrhal tonsillitis). Only 7 per cent of all the tonsils examined were ulcerated or contained true abscesses. Large pieces of muscle were attached to 13.9 per cent of the tonsils examined. It was interesting to note that the greatest proportion of nonchanged tonsils was obtained in September, the opening of the school year, and in June, the opening of the summer camps. When several pairs of tonsils were removed on the same day from different members of the same family, one pair usually bore evidence of infection and the others were not altered.

Medico-Legal Aspects of the National Defense Act*

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OF THE NEW YORK BAR

Medical men, and lawyers as well, because of the pressure of their professional duties, do not always have the opportunity, even though the interest may exist, to keep abreast of developments outside their fields of direct activity. This nation has adopted a statute, passed by its Congress, which indirectly affects both doctor and lawyer in peacetime; in wartime it may very considerably circumscribe their activities as professional men. Since the nation was once advised that in time of peace it should make preparations for greater efficiency of national defense, it is well that we as professional men should be informed of what may be expected of us in the event of a national emergency.

Lawyers and doctors are the natural leaders in the formation of public opinion. In fact they, together with ministers, are the best fitted to disseminate knowledge for the uplift and betterment of the welfare of society. Because of their better general education and highly specialized training as experts in their specific fields, they are especially qualified to avail themselves of this opportunity for public service. The government in an emergency, such as our last great one of ten years ago, looks to them especially for service and advice for the benefit of the public defense. Inasmuch as the government affords protection, both domestic and foreign, to its citizens, it is entitled in return to expect the best public service of which its citizens are capable. In order to render such service, it behooves us to be informed at least of what may be expected of us, if not actually prepared to give it.

What is the authority of law by virtue of which the government in wartime may circumscribe our activities as professional men? The answer is, the authority of the "National Defense Act." Let us inquire then into the background and reasons which prompted the adoption of such a law.

It is the culmination of the experience gained by our nation as a result of our six previous wars. Possibly General Washington may have been short-sighted, in view of the events of the ensuing century and a half, in believing that we could avoid becoming involved in world relations. Present-day events on the opposite side of the globe may conceivably demand contrary to his supposition, our professional services, if required by our government. The ineffectiveness of our first confederation of states, Washington's handicaps through short enlistments, lack of discipline, lack of effective military authority, absence of funds, and almost disregardful lack of cooperation between the states, were all such lessons as induced, together with many other motivating causes arising subsequently, to induce the passage of the "National Defense Act." Our people did not profit until 1920 from the lessons learned in consequence of the five succeeding wars following the Revolution.

Quoting from a government publication entitled "The Work of the War Department," one may read (p. 7), on the subject. "With the fear of militarism, definitely established in their minds, the people repeatedly refused to sanction a large standing army. On the other hand, they recognized the need for common defense and accepted it as a basic duty of citizenship. The law of

1792 undertook to solve the problem, but enrollment and training in the local units were compulsory, and necessitated a measure of control by the Federal Government which the states were unwilling to concede. Up to 1916 little was done to harmonize these conflicting conceptions. Those who were directly responsible for the nation's safety urged the maintenance of a standing army large enough to meet any emergency. After each war investigations were conducted to fix the responsibility for the needless loss of life and the reckless expenditure of money. For several years prior to 1916, state troops, which had come to be known as the Organized Militia, had been active in securing from their state governments, some of the concessions necessary in order that the Federal Government might weld these forces into a homogenous whole, capable of efficient service, and available upon call of the president. These forces came to be known as the National Guard, which the Federal Government, with the consent of the States, trained within the limits of congressional appropriations. In 1916 it was necessary to mobilize on the Mexican border the whole of the National Guard. During the resulting months of Federal service it proved to be an effective force.

The first real effort to formulate a definite military policy consistent with the traditions, customs, and ideals of the people, was the National Defense Act of 1916. Before this law could be carried into effect we were plunged into the World War. In spite of our unpreparedness we met this test with that spirit of service and sacrifice which makes this nation strong. This was the first time in our history, that we were able to organize armies in the beginning of a war on the principle of the draft, and this point, in spite of errors consequent upon hasty organization, marked a definite step forward.

"With the lesson of the World War still fresh in mind, attention was directed again to the establishment of an adequate military policy. The Act of 1916 was amended June 4, 1920, incorporating the lessons of the war experience and providing for effective cooperation between the states and the Federal Government. It is now possible to develop in time of peace, a citizen army that is adequate for protection in time of war, yet wholly democratic. Such an army of the people and controlled by them is the best security against aggression from without and against autocratic, militaristic usurpation from within.

This National Defense Act of June 4th, 1920, declares in its first section "That the Army of the United States shall consist of the Regular Army, the National Guard, while in the service of the United States, and the Organized Reserves, including the Officers of the Reserve Corps, and the Enlisted Reserve Corps." In its next section, among the other branches of the regular army, it includes the Medical Department, Judge-Advocate General's Department, and the Chemical Warfare Service. The General Staff Corps, which is likewise established, has the duty "to prepare plans for National defense and the use of the military forces for that purpose, both separately and in conjunction with the naval forces, and for the mobilization of the manhood of the nation and its material resources in an emergency."

This General Staff is charged with the making of "necessary plans for recruiting, organizing, supplying, equipping, mobilizing, training and demobilizing the

* Read before the Society of Medical Jurisprudence, March 14.

Army of the United States, and for the use of the military forces for national defense." The medical man's functions commence with the recruiting of the men; he makes the preliminary examination of the recruits and his decision accepts or rejects them. The lawyer functions at once in the procuring of the supplies for the armed forces; and in administering military justice. He it is whose qualifications also determine in part the fairness and legality of contracts into which the government enters for the purchase of supplies for the army.

The Medical Department of the Army, as defined by the Act, consists of the Medical Corps proper, with its correlative business branch known as the Medical Administrative Corps to care for the abundant paper work and property accounts of the Medical Corps; of the Nurse Corps, the Dental Corps, the Veterinary Corps, and the enlisted men to perform the routine duties. The ratio of medical officers is six and one-half for every 1,000 men, or about one doctor for every 154 men of the army. The ratio of the Medical Administrative Corps is one officer to every 2,000 men. One dentist is allowed for every 1,000 men—quite a number of patients for one dentist to handle.

The scope of the medical, surgical, and hygienic work embraced within the functions of the Medical Department of the army is far broader than ordinarily falls to the lot of the private, or even the hospital, practitioner, to experience. In general its activities may be said to be in a sense more preventive in their nature than remedial, in peace-time. Since the army doctor has under consideration, in mind at least, large numbers of men, and has preventive sanitary measures constantly to attend to, affecting many men of a command, it is probable that he is forced to take a broader view of the work and possibilities of his profession, than is the private practitioner. At least, his mind is freer from rent problems, and matters of slow paying patients.

The Medical Department is charged with such preventive measures to assure the health of a command as the following: Military Hygiene and Sanitation; Prevention of Communicable Diseases; Insect-borne Diseases; Principles of Personal Hygiene; Medical and Sanitary Inspection. Of the remedial class of work which its officers perform may be mentioned the treatment of surgical cases, intestinal diseases, venereal diseases, diseases of the respiratory system, the management of cases in hospital, etc.

In its preventive activities the Department lays much stress upon matters of military hygiene and sanitation. Much subsequent labor to the medical officer, cost to the government through hospitalization following inattention to such measures, and loss of effective man-power, is saved by close attention to its preventive precautions. The medical practitioner in civil life can scarcely be expected to concern himself with such matters—personally and financially unprofitable to him—as responsibility for sanitation, sanitary supervision, instruction in hygiene and sanitation, sanitation details, sanitation in a theater of operations (not a hospital theater), personal cleanliness, fitting of shoes and care of the feet, barbers and barber shops, water supply, foods and drinks, the examination of permanent food handlers, kitchens, mess-halls, and bakeries, cleansing of cooking utensils, garbage, excreta, manure, the pollution of streams and the analysis of sewage, mosquitoes, flies, lice, bedbugs. The army medical officer is required to be an expert on all these subjects and to be able to apply his knowledge at all times. The private practitioner of medicine might be tempted to pass any of his patients over to some obliging colleague, should they be afflicted with any of the last-named parasites. The army doctor cannot. A certain

Medical Department pamphlet referring to mosquitoes, informs the profession that "only female mosquitoes are blood-suckers, the males being vegetarians." Possibly the sanitary conditions of the alimony club in the famous Ludlow Street Jail in New York City might confirm this assertion as a fact.

On the subject of the communicable diseases of man the Medical Department of the Army places responsibility upon its officers for the initiation and enforcement of preventive measures. It defines the principal objects of military hygiene and sanitation, the scope of preventive measures, the influence of environment, the principal modes of transmission, the establishment of quarantine, and requires the preparation of statistical charts and reports regarding communicable diseases.

As a result of the studies of the Department it has published instructions for the prevention of insect-borne diseases, such as malaria, yellow fever, denga, the plague, typhus, and relapsing fever. Taking typhus as an illustration, it declares that "the causative organism of typhus is transmitted from one person to another by clothes-lice, and perhaps by other insects." It requires the following measures to be employed to prevent its spread: the "extermination of the lice by the sterilization with steam of all clothing, bedding, equipment, personal belongings, etc., of all typhus patients, the protection of such patients from the bites of lice, and frequent bathing."

The army reminds the recruit upon enlistment, that attention to hygiene is especially important to the soldier, in view of the fact that the government, before allowing him to enlist, has given him a thorough physical examination to determine that he has no disease, and that it then becomes his duty to himself and to his country to aid in every way in keeping himself well and ready for any service. He is reminded that in most of the wars of the past more men have died from illness than have been killed in battle. The ravages of disease our men underwent so recently as during our Spanish-American War were not repeated in the World War, due to the increased knowledge of the Medical Department of the Army, and its efficient officer personnel.

It is well known that intestinal diseases carried off thousands of our soldiers in the mobilization camps in this country, and in the field in Cuba, during 1898. Typhoid and paratyphoid fevers, bacillary and protozoal dysenteries, common diarrhea, food infection (salmonellosis), and food intoxication (botulism), and helminthic infestations were common. Now, when such infections occur, the medical officer in charge is required by regulations immediately to take the prescribed steps for their treatment. Should the epidemic be common diarrhea, so prevalent at one time, the medical officer knows at once how to handle it, and to prevent its spread. When persistent, and blood and mucus are being discharged, it is regarded as being suspicious of dysentery, and specimens of the feces are submitted to the laboratory for examination and report. Extensive outbreaks of common diarrhea can usually be traced to the use of spoiled food, especially canned food. Can you imagine a laboratory examination of feces or consideration of the deleterious effects of canned foods in our army in 1898? Or were there education in sex hygiene, physical inspections, and prophylactic stations, and disciplinary measures imposed for the non-observance of such measures, then? The National Defense Act has accomplished much!

So much for the Medical Department of the Army. Long may it live!

We turn now to a consideration of the legal department as created and perpetuated under the Act. As

mentioned, it consists of the Judge-Advocate General's Department. Etymologically, a judge-advocate is defined as an officer detailed to conduct proceedings before, and to advise a court-martial. In our military practice the Trial Judge-Advocate performs these functions, he being both prosecutor and adviser of the court in procedural matters, as well of substantive court-martial law. Occasionally the defense counsel may be up-held in his contentions before the court.

The functions of this Department of the army have been outlined in a government publication (*Work of the War Department*) thus: "The Judge-Advocate General's Department, in addition to its specific statutory duties in connection with the administration of military justice, is called upon to give legal advice concerning the correctness of military administration, matters affecting the rights and mutual relationships of the personnel of the army, and the financial, contractual, and other business affairs of the War Department and the Army."

The statutory duties mentioned in this outline concern chiefly military justice. This is primarily the enforcement of military discipline among members of the army. Mainly it has to do with the conduct of courts-martial. The substantive law of that subject, and its procedural as well, are largely covered by the 121 Articles of War enacted by the Congress for the government of the army, supplemented by the *Manual for Courts-Martial*. This publication may be likened in the thoroughness and comprehensiveness of its compilation to the *Commentaries of Blackstone*. He who runs may read it, and digest it, if he runs and reads thoroughly enough. Both are excellent works.

Courts-martial are three in kind, the Summary Court, consisting of one officer, who is at once the prosecutor, defense counsel, and judge of the minor offenses; the Special Court, consisting of not less than three officers, with somewhat broader powers of hearing and determining offenses in the military service; and the General Court, of not less than five officers, with jurisdiction over all other military offenses and common-law and statutory crimes committed by those in the military service. The last named court has a "law-member" detailed to it. He acts as adviser to the court, and rules exclusively upon most questions arising in the course of a trial, in behalf of the president of the court, who is always the senior officer sitting upon it. The Trial Judge-Advocate, not necessarily and seldom a lawyer, but detailed from the officer personnel of the army, prosecutes. The accused has the right to a counsel to defend him detailed from the same personnel. He may also select individual counsel for the purpose if he chooses, either an officer friend, or civilian lawyer. The army contains many lawyers who have forsaken the emoluments of private practice for the pleasures of army life, to serve and rise as generals of the combatant branches. Only one lawyer at a time in the regular service can ever aspire to become a general, and then only as chief for a short period while serving as Judge-Advocate General of the Department. In civilian life likewise a lawyer may become a general, too, if acquainted with a president, and if his record should not be such as might have displeased a senator or two.

The office of the Judge-Advocate General is divided into sections dealing in the main with the appellate jurisdiction which it exercises over court-martial records of cases tried throughout the army. Before a soldier or officer is finally sentenced by a military court, and the sentenced promulgated by his commanding general, the record involved in his case, including the original charges, the report of the investigating officer, which is similar in some respects to a hearing in non-military life before

a committing magistrate, the record of his trial, and the review by the Staff Judge-Advocate, has been carefully examined for irregularities and careful compliance with all statutory requirements. It is rare, if in fact not unknown, for an unjust conviction in the army to stand all these tests, and survive.

Each commander of the nine corps areas into which this country is divided has his staff judge-advocate and assistants. They act as the officers of military justice within the corps area, also as legal advisers to the commanding general.

The legal questions arising upon administrative matters, upon which they are required to pass judgment in aid of the responsible authority of the area, are numerous and astonishingly diversified. The thought of their diversity would not occur to a lawyer in civil life. But the government's relationships with the community are many. The Staff Judge-Advocate may be called upon to advise his commanding general upon express and implied government contracts, their assignment and modification, and breach; special statutory rules governing the making of contracts, accountability and responsibility for property, the use and disposition of personal property, the use and disposal of real estate; statutes and regulations relating to public funds, the applicability of appropriations; and the power of an agent to subject the government to liability in contracts. These are but a few of the administrative-law questions with which the staff judge-advocate deals.

The matters affecting the rights and mutual relationships of the personnel of the army, mentioned heretofore, include the appointment, responsibility, and rights of officers of the army as government agents, and as individuals. The individual domestic and the collective rights and liabilities of enlisted men in their relationships with the civilian community occupy their share of the time of a staff judge-advocate. His is the responsibility of being correct in his legal conclusions and opinions when advising his commanding general.

Whereas his client may not be penalized in costs if the judge-advocate should be wrong, the latter's standing in the estimation of his superior officer might suffer a much more costly lapse, in the event of his having exercised incorrect legal knowledge and judgment.

The Chemical Warfare Service is an outgrowth of our army's experience in the world war. The Act creates it under the charge of a brigadier general as Chief, with one hundred officers in grades from Colonel to Second Lieutenant, inclusive, and one thousand two hundred enlisted men. This department is charged with the investigation, development, manufacture or procurement, and supply to the army of all smoke and incendiary materials, all toxic gases, and all gas-defense appliances; the research, design, and experimentation connected with chemical warfare and its material.

It will be interesting to physicians and chemists to know that "the chemical warfare service is endeavoring to develop the discovery which has been made that some of the deadly gases used in warfare may be of value if used in small quantities to prevent and cure certain diseases, especially those of the respiratory organs. Influenza and similar plagues were practically unknown to the employees of the large war gas factories at the time these epidemics swept over the country with such fatal consequences. It is believed that mustard gas will be a valuable retardant for tuberculosis. This service has also solved a problem of effective and safe fumigation. Experiments have shown that tear gas, if mixed with hydro-cyanic acid gas for fumigation, will provide an intolerable concentration when the concentration of the

Medical Times

THE JOURNAL OF THE AMERICAN MEDICAL PROFESSION

A MONTHLY RECORD
OF

Medicine, Surgery and the Collateral Sciences

ESTABLISHED IN 1872

EDITED BY

ARTHUR C. JACOBSON, M.D.

Contributions.—EXCLUSIVE PUBLICATION: Articles are accepted for publication on condition that they are contributed solely to this publication.

When authors furnish drawings or photographs, the publishers will have half tones and line cuts made without expense to the writers.

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CANADA \$2.25 per year
FOREIGN COUNTRIES IN POSTAL UNION \$2.50 per year
SINGLE COPIES, 25 CENTS

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Notify publisher promptly of change of address or if paper is not received regularly.

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All communications should be addressed to and all checks made payable to the publishers.

MEDICAL TIMES CO.

ROMAINE PIERSON, *President*
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REGINALD E. DYER, *Secretary*

95 Nassau Street

New York

Cable Address: Ropierison, New York

NEW YORK, JUNE, 1928

Our Special Medical Jurisprudence Number

This issue was planned before the *Journal of the American Medical Association* published the subjoined editorial on March 31, 1928. We therefore take credit to ourselves alone for initiative in this matter. This issue is devoted to medicolegal matters, and we are in agreement with the editor of the *Journal of the American Medical Association* with respect to the high importance of this field of activity. So excellent is the *Journal of the American Medical Association's* presentation of the claims of forensic medicine, however, that we take the occasion to reproduce it herewith:

NEED OF INCREASED FACILITIES FOR PUBLICATION IN THE FIELD OF FORENSIC MEDICINE

The first medicolegal discussion of any extended nature in this country appears to be by Benjamin Rush in his *Introductory Lectures of 1811*. Lecture 16 is on medical jurisprudence; in it Rush makes the following statements: "They entertain very limited views of medicine who suppose its objects and duties are confined exclusively to the knowledge and cure of diseases." Medical science is to render other services to society and is intended "to extend its benefits to the protection of property and life and to detect fraud and guilt in many of their forms." In other words, while the primary object of practical medicine is to maintain health, medical knowledge is to be used also in solving problems of a medical nature that arise in the course of the administration of justice, criminal or civil. Incidentally, Rush laments the comparative lack of publications and of teach-

ing in medical jurisprudence in this country, and in these respects the conditions perhaps are even more lamentable now than in his day. Whatever the reasons may be, forensic or legal medicine cannot be said to receive the recognition and support here that its importance demands or that it receives in certain other countries. The United States is far behind in all respects and especially in the matter of medicolegal periodicals. There are noteworthy and influential medicolegal journals in German, French, and Italian, but the periodical medicolegal publications in English are and have been insignificant and inconsequential. Recently a new publication has appeared in London, the *Police Journal*, the object of which is to be a medium for the discussion of all matters of common interest to all police forces of the British Empire. The field of the new journal is practical police and criminologic work in general, but it is of interest to note that the technical and medicolegal branches of the work are to be included because police work is "becoming in an increasing degree scientific" and it is aimed to secure a more active cooperation of the professional police officer and the medicolegal and other experts. In the United States there is great need not only for a high grade periodical like the *Police Journal* but also for an adequately supported technical journal or archives of legal or forensic medicine in order to foster its development in the interest of a better medicolegal service to the public.

The Future of Disease, of Medical Science, and of Medical Practice

Dr. Alexis Carrel, of the Rockefeller Institute, reminds us that while we have accomplished miracles in the field of infectious disease control, so that our industrial, military and civil lives have been divested of most of their terrors in this respect, our victories have not greatly modified the position of the average man as regards disease and death. "He surely has more prospect of being tortured by some form of cancer, afflicted with slow diseases of the kidneys, the circulatory apparatus, or the endocrine glands, of becoming insane, or of suffering from nervous diseases. . . . Modern medicine protects him against infections which kill rapidly, but leaves him exposed to the slower and more cruel diseases and to brain deterioration."

It "stands to reason" that just as we have learned how to circumvent the infectious diseases we shall learn how better to resist or conquer the non-infectious ailments.

In every new phase of civilization there will be new disease categories. To assume that the race will ever cease to suffer from disease would be naïve, to say the least. Each new category will demand the development of entirely new methods by men and women of genius.

Present "quantity production"—excess population—is one of the things that makes the problems of medicine especially hard.

The reduction in populations which is a sure and certain eventuality will greatly simplify the problems of medicine. It is impossible to deal with the non-infectious diseases in mass fashion (and hard enough with the infectious), whereas small groups and individuals are manageable.

One reason why we have gotten somewhere with diabetes is because it occurs in a comparatively small group of humankind; thus it is a manageable thing.

So with thyroid disorders; they have been intensively studied; the individual thyroid patient gets proper attention; it is again a manageable problem.

The movement for lessened populations will gain its greatest impetus when it comes to be more fully realized

that thereby the successful management of disease will be promoted.

The fall in birth rates, now so conspicuous a feature of our social life, gives the greatest hopes for world health.

The Hippocratic school of physicians were fortunate in their work because the population of ancient Greece was small and the people of one culture.

In so far as we can develop in the future an international culture among groups reduced in numbers the cause of public and individual health will prosper. Our increasingly rapid communication and transportation are doing the most to develop this new culture and understanding. The air routes of the future will make suburbs of Moscow and Tokio. The aeroplane is one of the symbols of a more healthful and peaceful future.

It is impossible to get much farther than we stand at present with respect to individual and community hygiene and medical service so long as unwieldy populations and relative isolation continue to prevail. Harry H. Moore, in his *American Medicine and the People's Health* (Appleton, 1927), shows very clearly that there are far too many maladjustments in medicine to-day: inadequacies of personnel and financial support as regards official health agencies, shortage and inaccessibility of personnel and equipment in private practice, the inability of certain classes of people to pay the cost of special medical service, and the prevalence of various inferior types of treatment as practised by cultists and quacks of all sorts.

For the present organization of medicine as specialized service, private medicine, hospitals, clinics, medical social service units, private health and medical agencies, and public health organizations both as federal and municipal departments, Moore would substitute "some form of organized group institutional practice giving thorough service at moderate cost to the seventy-five per cent of the population of moderate means." This, to our mind, if brought about, would be nothing but pious palliation, stop-gap bureaucracy, and compromise with numbers—the numbers being devoid of self-respect. The civilized man conceives of these matters in an individualistic sense and as having a decent economic background. The promoters of these mass schemes would never accept medical service of such a type, themselves. Moore is thinking in behalf of a supposedly benighted age, without hope of real salvation. He is a good field marshal. The future will need statesmen.

So long as certain elements of the race breed like lice, such plans as Moore's will have to be given serious consideration, and may even be put into practice. But we shall ultimately escape the old morasses and devices and through all the present confusion must continue to think straight.

The medical profession is interested in radical social betterment and not especially sympathetic toward palliative measures, expressed hostility toward which, however, it must be remembered, is taboo. The truth, however, is that the medical profession is thinking deeply about the means whereby social betterment of a fundamental sort will enable the sanitary conscience, as Rosenau calls it, to attain really adequate results. The prevailing welfare work does not go deep enough for anyone except hidebound exponents of purely capitalistic principles. Compulsory health insurance, for example, satisfies the Bourbons who typify our reactionary groups, but thinking physicians feel that such a measure represents the quintessence of social immorality and can in no wise further the sanitary and hygienic interests of the masses nor do other than lower the efficiency and morale of the profession.

The medical profession is thinking far beyond the colossal carnage and disease which follow in the wake of capitalism, industrial exploitation and imperialism, and looking forward to a social order which will reject attempted adjustments to such conditions.

Until now, medicine has bound up the bleeding bodies, and here and there a too great individualism has led some to wash their hands, like Pontius Pilate, of the rotten affairs of the day; but most physicians have not been blind to the crucifixions at which, perforce, they have played the part of Joseph of Arimathea.

What is the precious thing that must never be wholly lost, by which medicine must always be tested? It is the Art of Healing, without which the spiritual ductless glands (so to speak) of the profession will not function properly, without which, indeed, its boasted science will be as sounding brass and tinkling cymbals.

A social order and a medical science which will preclude the humane and highly individualistic art of which we are writing—that artistic approach to the drab, sordid or heroic exigencies of life, sickness and death—is not to be thought of with complacency. Shall there be artists or only secluded artisans? Shall there be a fine art or only glorified plumbers and carburetor experts, living aloof in ivory towers? Shall science be eagerly applied or shall it be cloistered? Shall men have hearts and souls or not? Shall there be life or death? The questions answer themselves.

Were a highly evolved technology to make of science a fetish, to the exclusion of all things else, and were the Lenins of science, through obscene incantations, to make the humanists afraid to call their souls their own, then indeed should no light be seen on our journey to a futile Damascus.

The sick man demands above all things else a close personal interest. He cannot be repaired or kept in health except through a personal power that will influence him morally, spiritually and mentally—and through these physically (Dr. M. Allen Starr). When man and his physician cease to be individuals medicine ceases to be an art and science a blessing.

Medicine, then, will always remain an art. The mother of the sciences, it demands of them sustenance, not maternity.

Miscellany

No More Cakes and Ale

We never insist upon our horses, cats, pigs, dogs, or poultry consuming diets unnatural or distasteful to them; we are ready to allow that all wild animals know what is good for them.

Why, then, do we enforce these measures upon ourselves?

Is man with his lofty intelligence, with his achievements, his methods of government, of warfare, of justice, of communication—is man who aspires to the heavens with his skyscrapers and scours them with his airplanes—in this particular a little lower than the beasts that perish and the worm that never sees the light?—Ford Madox Ford, in *Harper's Magazine*.

Portrait of a Doctor

In motoring through a rural section recently on a professional mission I met many country doctors—hard-working but light-hearted men whom I envied for the sense of social usefulness that must be theirs.

Here and there I met doctors who were a bit downcast from the difficulties of their calling, men who would not, I suspect, commend the medical profession to their sons.

In the hope that every disillusioned doctor in America may sooner or later see it, I want to recall some memorable lines from the gifted pen of the great Elisha Bartlett.

"There is no process," said this distinguished doctor, "which can reckon up the amount of good which the science and art of medicine have conferred upon the human race.

"There is no moral calculus that can grasp and comprehend the sum of their beneficent operations.

"Ever since the first dawn of civilization and learning, they have been true and constant friends of the suffering sons and daughters of men.

"Through their ministers and disciples they have cheered the desponding.

"They have lightened the load of human sorrow.

"They have dispelled or diminished the gloom of the sick-chamber.

"They have plucked from the pillow of pain its thorns, and made the hard couch soft with the poppies of delicious rest.

"They have let in the light of joy upon dark and desolate dwellings.

"They have rekindled the lamp of hope in the bosom of despair.

"They have called back the radiance of the lustreless eye and the bloom of the fading cheek.

"They have sent new vigor through the failing limbs.

"And, finally, when exhausted in all their other resources, and baffled in their skill—handmaids of philosophy and religion—they have blunted the arrows of death, and rendered less rugged and precipitous the inevitable pathway to the tomb."

Surely it is a high calling to serve at the altars of the science and art of medicine!

"In the circle of human duties," we may say with Bartlett, "I do not know of any, short of heroic and perilous daring, or religious martyrdom and self-sacrifice, higher and nobler than those of the physician. His daily round of labor is crowded with beneficence, and his nightly sleep is broken that others may have better rest. His whole life is a blessed ministry of consolation and hope."
—Glenn Frank, in the *Evening World*.

Legal Aspects of the National Defense Act

(Concluded from page 166)

mixture is one-eighth of the strength that would injure human life, and that the effect of the tear gas remains until the concentration of the mixture is again reduced to this strength." (Work of the War Department, page 26).

In addition to the three branches enumerated, in which we are specifically interested, the National Defense Act authorizes the establishment of two other auxiliary branches for the procurement and training of prospective officer personnel. These consist of the Reserve Officers Training Corps and Citizens Military Training Camps. The former are established and maintained in civil educational institutions, the latter upon military reservations or elsewhere, for the military instruction and training, with a view to their appointment as reserve officers or non-commissioned officers, of such civilians as may be selected upon their own application. Many pre-medical and pre-law students receive their basic military training from these sources. After quali-

fication in professional schools, such students are then eligible to be commissioned in the two branches dedicated to National Defense in which we are especially interested.

Of course in the organization of such an army as we sent overseas in the World War, the purchase or procurement of military supplies constitutes a most important function. The people of this country have profited by the sad experience caused by the activity of profiteers in connection with such matters. The National Defense Act authorizes the president through the head of any department of the government, to place an order with any individual, firm, association, company, corporation, or organized manufacturing industry for such product or material as may be required, and of the nature and kind usually produced by them. Compliance with such an order is made obligatory. Any such government order takes precedence over all other orders and contracts theretofore placed with them. The would-be profiteers of the future will be astonished to learn that the president is authorized to take immediate possession of any such plant or plants and to manufacture therein such product or material as may be required for government purposes. Any individual firm, company or otherwise which shall fail to comply with the provisions of the Act under consideration, shall be deemed guilty of a felony and upon conviction shall be punished by imprisonment for not more than three years, and by a fine not exceeding \$50,000. Observe that the penal provisions of the law are mandatory. They *shall* be so punished.

A still further precautionary authorization, as well as a wise one, is incorporated in the National Defense Act. Its full import scarcely appears in the small paragraph containing it.

Its significance is impressive and its embryonic effect all-comprehensive. Its terms are this: The president is hereby authorized, in his discretion, to appoint a board on mobilization of industries essential for military preparedness, non-partisan in character, to organize and coordinate the work described." This board has already been appointed and has been functioning for several years. The results of its work have not been made public. Some of the reasons for the creation by law of such a board have been stated in the government publication heretofore quoted. It is stated there: "An important part of the army work is planning for the mobilization of industries. In the World War the government was unable to gather up quickly the multitude of necessary war supplies. At the beginning of the war, there was no adequate system by which information could be acquired as to where the materials could be found, who could manufacture them, and how much they would cost. There was consequently much confusion and waste. Many patriotic citizens owning industrial plants converted them hastily into munitions factories or factories for other war supplies, often at a financial loss to themselves. Other citizens whose greed was greater than their patriotism, took advantage of the situation, and exploited the government to their gain. In the end the price was paid by the people of the nation, in loss of money and time and in reduction of efficiency.

To eliminate as far as is possible such confusion and waste in any future emergency, the present policy provides for the mobilization of the industrial resources of the country. This work is being done by a committee of experts made up of civilians and Army officers under the direct supervision of the Assistant Secretary of War. They ascertain where industrial plants are located, the size of the plants, the kinds of work they are equipped to do, and the cost of their products. These experts are

now rendering a great service both to the Nation and to the manufacturers."

Statutory authority will be doubtless enacted to make effective the result of the studies of this board. The French Government is already engaged in such a legislative movement. Recent press dispatches have announced that a bill to carry into effect such a general provision of law in that country has been passed by their Chamber of Deputies. All manhood, as well as womanhood, as well as material resources, will be subject to draft for war purposes in France. The deputies have taken the precaution to incorporate in their bill an exception which exempts them from duty in time of war. The socialists in France have bitterly opposed this, insisting that in the event of war, the legislators should be placed in the front line, not of defense, but of offense.

We can agree with the latter in not desiring war, but in the event of an emergency requiring this country to participate, the National Defense Act has given us for the first time in our national history a unified military policy, established upon a basis of organization and effectiveness which will render us invincible, backed by the courage of our determination to uphold the right, as generally recognized by nations, and the laws of Christianity. At that time the doctors, lawyers, and chemists of the country will be put to the test to prove their qualifications as leaders of thought and action.

Discussion

DR. G. ALFRED LAWRENCE, Lieutenant Colonel, Med. O. R. C.—I feel the Society is to be congratulated on having been privileged to listen to the interesting paper we have just heard. To my mind the National Defense Act is of epochal importance in the military policy of our government. During the last 150 years our experience in military matters has been to a certain extent disastrous, but we have not stood still and to-day I think our knowledge in this regard is equal to that of any other nation. For instance, there was one phase of the medical work, as set forth in the National Defense Act, that might be mentioned for, if I heard correctly, it was not referred to by the speaker of the evening. That is the Psychiatric Service. During the World War there were three million men examined through the Psychiatric Service and through these mental tests there was a tremendous amount of man material saved for the army through proper classification and the efficiency of the service was thus augmented and improved—also a considerable percentage of unfit material was at once eliminated. In our military training camps to-day the Psychiatric Service continues to function and, having been of benefit during the World War, is going to be of greater efficacy should we have occasion to enter into active warfare again. This is only one of the many lessons that came to us through the great conflict and from which we have benefited. I am sure that through this National Defense Act we will be much better equipped to take our part in future hostilities, should occasion arise, and that in consequence there will be a much less loss of life than there was in the last war and a vast saving of money and material.

DR. ERNEST E. SMITH:—In view of the fact that the Chairman has called upon me personally, I can not let the occasion go by without expressing my appreciation of the pleasure of hearing this able presentation of the subject and voicing my regret that there were not more of the members of this society present to hear it. I am afraid, however, that this comparatively small audience reveals a condition that exists generally and of which we are only conscious of in a subconscious way. When we are concerned with war we are enthusiastically concerned with war; when we are concerned with peace we are only interested in peace. If the subject of this meeting were to be presented at the outbreak of hostilities there is no doubt that everyone would so adjust his affairs so as to be present to listen to it. Then too, I believe if it had been known to the members of this Society that a paper of such interest as this has proven to be was to be presented more of the membership would have been represented. Many of us miss much by being too concerned with the affairs of the day. However, the fact that the resources of this great people, of which we are a part, are being mobilized for a service which they may be called upon to render in some future possible contingency is a step that distinguishes our civilization. There are those of us that regard even a consideration of the possibility of another war as a step backward. Those who have listened to this paper to-night, however, will agree that it is a step forward.

I was particularly interested in the medical and chemical aspect of the subject and am sure I voice the appreciation of all those present when I express my personal appreciation for the paper presented.

MR. DORÉ (closing the discussion):—I have nothing to add beyond saying that the paper was designed as an outline, a survey of the three branches within the War Department in which the members of this society are presumably interested. I might have extended the paper over many more pages by giving you details and ramifications and aspects of this work, but the medico-legal aspect is the one I wished to leave with you as a matter of thought regarding the opportunities for service, and the preparation, as professional people, to render service if called upon to do so and if the emergency should arise. The need is great and the need of our preparation to meet it is greater still.

The Physician's Library

Physical Diagnosis. By Charles Phillips Emerson, A.B., M.D. Philadelphia. J. B. Lippincott Company. 1928. Price, \$5.50.

The author, who is professor of medicine in the Indiana University, has sought to cover the entire field of physical diagnosis in a volume of 553 pages with 324 text figures, the great majority of which appear to be original photographs of local patients. This is a striking feature, for one would hardly expect to see so great a variety of the clinical expressions of disease in a relatively small and inland medical school. In a work on general diagnosis again one would hardly anticipate the presentation of so many dermatological conditions, for the book is nearly as good a manual of dermatological diagnosis as some of the special works on this province. The large amount of practical information, considering the small volume of space, is likewise impressive; as is also the historical perspective of the author. If we were to make a criticism of any kind it might be to the effect that so much information in so compact a form is difficult to assimilate. But to offset this the author does not go very far in ophthalmic diagnosis although one would imagine that study of the eyegrounds is of great significance in general medicine and neurology; and he does not go back of the pupil and lens. In regard to the ear he takes up only the auricle and there is no mention of the mastoid region. But many of the omissions of the book are clearly due to the fact that the author has already published a textbook, *Clinical Diagnosis*, which takes up all laboratory resources which explains the lack of all reference to blood counts, uroscopy, roentgenography, etc. We are glad to be able to recommend highly this latest work of the author.

American Illustrated Medical Dictionary. By W. A. Newman Dorland, A.M., M.D. Octavo of 1389 pages, with 425 illustrations, 107 in colors. W. B. Saunders Company, Philadelphia. 1927. Flexible binding, \$7.00 net; thumb indexed, \$7.50 net.

This is the fourteenth edition of a lexicographic classic. It ably reflects our growing vocabulary with its two thousand or more new words. The revision has been done with care to conform with new conceptions and over a hundred new line-cuts add to its illustrative excellence. Its many valuable features give it an encyclopedic character. Its definitions set a high standard in clearness and conciseness. It is convenient in size and binding and admirable in typography. This work is indeed one of the glories of medical literature.

The Use of Symptoms in the Diagnosis of Disease. By Hobart Amory Hare, B.Sc., M.D., LL.D. Ninth ed. Philadelphia. Lea and Fibiger. 1928. Price, \$5.50.

The author in his preface stresses the present day leaning on laboratory diagnosis and the corresponding indifference to straight clinical findings. In this connection he mentions the recent efforts to discover an anthropological or somatic basis for disease, quoting Draper's description of the child most apt to develop infantile paralysis. This tendency when expanded may offset too rigid leaning on merely laboratory findings. The laboratory report is brilliant—rapidly come by and final; but in real life problems are not solved in this fashion. The book therefore omits reference to laboratory diagnosis in the interest of simplicity and depends chiefly on bedside findings. The author distinguishes between two rival plans of diagnosis. One, the older, consisted of a snap or emergency procedure, with resulting comparison of the actual syndrome with the pattern. The other inverted this process and sought to build up the diagnosis by grouping the symptoms.

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